# COMMAND INSPECTION PROGRAM EXCEPTIONS DOCUMENT

		 001
Page 1	of 3	

Division:	Chapter:
Valley	12
	Date:
fflander	04-30-2009
	1

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans. A CHP 51 Memorandum may be used if additional space is required. TYPE OF INSPECTION Total hours expended on the Corrective Action Plan Included inspection: ☐ Division Level ☐ Command Level Attachments Included ☐ Executive Office Level 10 Hours Forward to: Valley Division Follow-up Required: Due Date: ☐ Yes □No Chapter Inspection: Occupational Safety Program Inspector's Comments Regarding Innovative Practices: NONE. Command Suggestions for Statewide Improvement: DNE. Inspector's Findings: 1. The Area's quarterly Occupational Safety Meeting minutes were not being posted on the Occupational Safety Board. 2. The Area had not updated the CHP 442, Individual Accident, Injury and Safety Recognition Record. 3. There were several employees who had not completed the annual review of the CHP 712 A, Injury and Illness Prevention Program Orientation and Review. Commander's Response: 
Concur or 
Do Not Concur (Do Not Concur shall document basis for response) Commander concurs with the inspector's findings. Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

NONE.

NORTH CAPPER

### **COMMAND INSPECTION PROGRAM**

CEPTIONS DOCUMENT

Page 2 of 3

Command: 285	Division: Valley	Chapter:
Inspected by: Sergeant Ho		Date: 04-30-2009

Required Action		Year Very Minus	
Corrective Action Plan/Tin	neline		

The Yuba-Sutter Area noted and corrected three deficiencies during the recent Chapter 12 evaluation of the Area's Occupational Safety Program.

- 4. C (2). Prior to the inspection, the Area's quarterly Occupational Safety Meeting minutes were not being posted on the Occupational Safety Board. They are now being posted after each safety meeting.
- 5. I, 5. I (1), 5. I (2). The Area had not updated the CHP 442, *Individual Accident, Injury and Safety Recognition Record*, and the last safety recognition emblem summary was prepared in 2001. In order to correct the matter, a new binder was put together which contains all current CHP 442's. In addition, a new Excel spreadsheet was created to show when an employee is due for his/her next safety emblem.
- 6. a (5). There were several employees who had not completed the annual review of the CHP 712 A, *Injury and Illness Prevention Program Orientation and Review*. Those employees were directed to read the Injury and Illness Prevention Program and complete a CHP 712 A. All employees are now current.

## COMMAND INSPECTION PROGRAM

CEPTIONS DOCUMENT

Page 3 of 3

Command: Division: Valley		Chapter:
Inspected by: Sergeant Ho	offlander	Date: 04-30-2009

Employee would like to discuss this report with the reviewer. (See HPM 9.1, Chapter 8 for appeal procedures.)	NSPECTOR'S SIGNATURE	DATE 4/30/09 DATE 4-30-69
☐ Reviewer discussed this report with employee ☐ Do not concur	REVIEWER'S SIGNATURE  FOR M. CHAMPION	OS 26 09

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Yuba Sutter	Valley	285
EVALUATED BY		DATE
Sergeant B. Hoffl	ander, ID 14337	04/06/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  SUSPENSE DATE  04/16/2009					
FOLLOW-UP REQUIRED  Yes No	☐ Correction Report	COMMANDER'S REVIEW	Long	DATE 4/6	109
1. GOALS AND ACCOMPLIS	SHMENTS	Yes V	ACTION REQUIRED NO	CORRECTE	)
a. Is the command familia     Safety Manual, Chapter	r with the Occupational Safety Progr r 13?	ram as outlined in HPM 1	0.6, Occupational	✓ Yes	□No
(1) Are goals develope	ed in accordance with departmental p	policy?		✓ Yes	□No
(2) Are environmental	factors, exposure factors, and past e	experience/trends conside	ered when setting goals?	✓ Yes	□No
(3) Are illness and non	-serious/non-traumatic injuries exclu	uded from occupational sa	afety goals?	✓ Yes	□ No
(4) Are goals appropria	ately categorized?			✓ Yes	□ No
(5) Are goals realistic?				✓ Yes	□No
(6) Are goals consister	nt with departmental objectives?			✓ Yes	□No
(7) Is input from all leve	els considered before goals are esta	blished?		✓ Yes	□No
b. Are goals being accomp	olished?			✓ Yes	☐ No
(1) Accurate reporting	on CHP 113, Accident and Injury Re	port?		✓ Yes	□ No
(2) Are accidents increa	asing?			☐ Yes	☑ No
(3) Are injuries increasi	ing?			☐ Yes	☑ No
(4) Why are they increa	asing/decreasing?				
(5) Is CHP 113, Accide	nt and Injury Report, posted or read	ily accessible?		✓ Yes	□ No
(6) Are employees know	wledgeable about goals and achieve	ements?		✓ Yes	□ No
(7) Are employees providing suggestions toward goal atta				✓ Yes	□ No
2. PARTICIPATION		Yes Yes	No No	CORRECTED	2
a. Commander actively inve	Commander actively involved in program?				□No
(1) Commander active i	n injury/illness case management?			✓ Yes	□No
(2) What is the commar	nder's attitude regarding occupationa	al safety? Safety first ho	oth in the field and within :	and around	the office.
(E) Trick to the continual	ider o dilitade regarding occupations	area, oursely thist, or	on in the field and within		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(3)	Occupational safety issues discussed at staff meetings and	training days?		✓ Yes	□No
	(4)	Are safety issues in the meeting minutes?			✓ Yes	□No
	(5)	Commander comments regarding safety issues in performa	nce evaluations?		✓ Yes	□No
	(6)	Does the commander ensure use of appropriate safety equi	ipment?		✓ Yes	□No
b.	Are	managers/supervisors actively involved in the program?			Yes	□No
	(1)	Are managers/supervisors involved in case management?			✓ Yes	□No
	(2)	Do they have the appropriate attitude?			✓ Yes	□No
	(3)	Are managers monitoring supervisors' progress and efforts	to attain goals?		✓ Yes	□No
	(4)	Are supervisors monitoring employees' efforts?			✓ Yes	□No
	(5)	Do managers comment on safety issues in performance eva	aluations?		Yes	□ No
	(6)	Do supervisors comment on safety issues in performance e	valuations?		✓ Yes	□No
	(7)	Do managers/supervisors ensure the use of proper safety e	quipment?		✓ Yes	□No
C.	Are	employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
	(1)	Are employees involved in their case management?			✓ Yes	□No
	(2)	Are employees knowledgeable about safety goals?			✓ Yes	□No
	(3)	Are they aware of the command's achievements?			✓ Yes	□No
	(4)	Are employees practicing safety while performing their dutie	s?		✓ Yes	□No
	(5)	Are employees reporting unsafe conditions and/or work practical	ctices?		✓ Yes	□No
	(6)	Do employees work cooperatively to minimize hazards?			√ Yes	□No
	(7)	Do employees offer suggestions to improve occupational sa	fety?		✓ Yes	□No
	(8)	Is employee equipment properly used and maintained?			✓ Yes	□No
AC	CIDE	ENT AND INJURY TRENDS	Yes Yes	ACTION REQUIRED	CORRECTED	)
a.	Com	mander's method of identifying trends? Review of all CHP	1232	3s, and 268s when applica	ble, to stud	y trends,
	Asce	ertains input from all employees to identify problems.				
(	(1)	Are accidents and injuries being monitored to identify trends	?		✓ Yes	□No
(		Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior mee		eport, OSHA 300,	✓ Yes	□No
(	(3) <i>A</i>	Are personnel in the command aware of current and potentia	al trends?		✓ Yes	□No
		t corrective action has the command taken when a trend has				

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)    EVALUATED   Yes   Ves   Yes   Yes
a. What is the composition of the COSC? Comprised of Captain J. Young, Sergeant B. Hofflander, OSSI G. Nieto, Officer R. Barnett, Auto Technician T. Rockenstein.  (1) Is there representation from each collective bargaining unit?  (2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (9) Yes No  (1) Do committee members understand their roles and responsibilities?  (1) Is an agenda prepared prior to the meeting?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Minutes prepared for the COSC meeting?  (7) Yes No  (8) Minutes posted on command's Occupational Safety Board?  (9) Yes No  (10) Recording secretary appointed?  (11) Recording secretary appointed?  (12) Minutes maintained current year, plus three?
(1) Is there representation from each collective bargaining unit?
(2) Management and supervisory representation?
(2) Management and supervisory representation?
(3) Command Safety Coordinator assigned?
(4) Command Safety Coordinator active and effective?
(5) Are committee assignments rotated?
(6) COSC meetings held quarterly?
(7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (9) Yes No  (1) Do committee members understand their roles and responsibilities?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Are assignments given during Area meetings?  (7) Yes No  (8) C. Minutes prepared for the COSC meeting?  (9) Yes No  (10) Recording secretary appointed?  (11) Recording secretary appointed?  (12) Minutes posted on command's Occupational Safety Board?  (13) Are minutes included in HPP file?  (14) Minutes maintained current year, plus three?
(8) Do all committee members attend the meetings?
b. Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Are assignments given during Area meetings?  (7) Yes No  (8) Minutes prepared for the COSC meeting?  (9) Yes No  (1) Recording secretary appointed?  (1) Minutes posted on command's Occupational Safety Board?  (3) Are minutes included in IIPP file?  (4) Minutes maintained current year, plus three?
(1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Are assignments given during Area meetings?  (7) Yes No  (8) No  (9) Minutes prepared for the COSC meeting?  (1) Recording secretary appointed?  (1) Recording secretary appointed?  (2) Minutes posted on command's Occupational Safety Board?  (3) Are minutes included in IIPP file?  (4) Minutes maintained current year, plus three?
(2) Is an agenda prepared prior to the meeting?
(3) Are departmental and Division Occupational Safety meetings minutes readily available?
(4) Are these minutes utilized for Area meetings?       ☑ Yes ☐ No         (5) Are assignments given during Area meetings?       ☑ Yes ☐ No         c. Minutes prepared for the COSC meeting?       ☑ Yes ☐ No         (1) Recording secretary appointed?       ☑ Yes ☐ No         (2) Minutes posted on command's Occupational Safety Board?       ☑ Yes ☑ No         (3) Are minutes included in IIPP file?       ☑ Yes ☐ No         (4) Minutes maintained current year, plus three?       ☑ Yes ☐ No
(5) Are assignments given during Area meetings?
c. Minutes prepared for the COSC meeting?  (1) Recording secretary appointed?  (2) Minutes posted on command's Occupational Safety Board?  (3) Are minutes included in IIPP file?  (4) Minutes maintained current year, plus three?
(1) Recording secretary appointed?
(2) Minutes posted on command's Occupational Safety Board?
(3) Are minutes included in IIPP file?
(4) Minutes maintained current year, plus three?
(5) Minutes forwarded through channels?
d. Is the COSC effective?
(1) Are COSC recommendations clear, concise and pertinent to the command?
(2) COSC proactive to eliminate potential causes of accidents and injuries?
(3) COSC disseminate current information and training regarding health and safety issues?
e. Do all personnel receive current information regarding health and safety?
f. Are outside agency safety programs utilized as a resource?
g. Does the command maintain an effective health and safety communications system?

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

_			
	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	✓ Yes	□No
	(3) Do all members of the command participate in distribution of safety and health information?	✓ Yes	□No
	(4) COSC minutes posted in a timely manner?	✓ Yes	□No
	(5) Required posters prominently displayed?	✓ Yes	☐ No
	(6) COSC maintain the Command Occupational Safety Bulletin Board?	✓ Yes	□No
	(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific members?	✓ Yes	□No
5.	DOCUMENTATION EVALUATED ACTION REQUIRED Yes Yes	Yes	)
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?	✓ Yes	□No
	b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, utilized to request driver's license record check and filed in the employee's field folder?	✓ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	√ Yes	□ No
	(1) Are required injuries and illnesses logged?	✓ Yes	□ No
	(2) Entries made within six working days of notification of an employee injury or illness?	√ Yes	□ No
	(3) Is lost-time and limited-duty documentation accurate?	✓ Yes	□No
	(4) Retention according to policy?	✓ Yes	☐ No
	(5) Readily accessible for review by Cal-OSHA?	√ Yes	□ No
	(6) Previous calendar year log posted during February?	✓ Yes	□No
(	d. Are CHP 113s, Accident and Injury Report, compiled accurately?	✓ Yes	□ No
	(1) Commander review and sign?	✓ Yes	☐ No
	(2) CHP 113s and attachments processed in a timely manner?	✓ Yes	□No
E	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?	✓ Yes	☐ No
	(1) Are semiannual safety inspections conducted?	✓ Yes	□No
	(2) Are safety hazards identified?	✓ Yes	□No
	(3) Is corrective action taken within 30 days?	✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?	✓ Yes	□No
f.	Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?	✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	✓ Yes	□No
g	. Are the CHP 121 series thoroughly and accurately completed?	✓ Yes	□No
	(1) Supervisory comments in-depth, clear, and concise?	✓ Yes	□No
	(2) Commander signature on appropriate forms?	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

_	14	-	(1.01.0.00)				
		(3)	Routed within time frames?			✓ Yes	□ No
	h. Is CHP 208, Accident Prevention Report, thoroughly and accurately completed?					Yes	□No
		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
		(2)	Commander review?			✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□ No
		(4)	Properly routed within time limits?			✓ Yes	□ No
	i.	i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?				☐ Yes	☑ No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, current?		☐ Yes	✓ No
		(2)	Safety recognition emblem summary current?			☐ Yes	☑ No
	j. /	Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, kept curr	ent?	☐ Yes	☑ No
		(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Action Pl	an Review?	✓ Yes	□No
		(2)	Copies maintained with IIPP file?			✓ Yes	□No
6.	INJ	UR	Y AND ILLNESS PREVENTION PROGRAM	Yes Yes	ACTION REQUIRED Yes	Yes	)
	a.	Co	mmand specific IIPP on file?	1 255	I processor	✓ Yes	□No
		(1)	Is the program effective?			✓ Yes	□No
	(	(2)	Contains all required documents?			✓ Yes	□No
	(	(3)	Discussed with all employees?			Yes	□ No
	(	(4)	All employees understand their roles and responsibilities?			✓ Yes	□ No
	(	(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program Orienta	ation and Review?	☐Yes	✓ No
	(	(6) New employees review and complete CHP 712A, Injury and Illness Prevention Program Orientation and Review?				✓ Yes	□No
	(	(7) Are unsafe hazards or conditions identified, investigated, corrected, and documented?			✓ Yes	□No	
	(	(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	CON	MM	UNICATION WITH DOSH	Yes Yes	NO REQUIRED	CORRECTED	)
	a. E	Emp	ployees aware of procedures regarding DOSH inspections?			✓ Yes	□ No
	b. Command's documents readily available for review by DOSH Compliance Officer?					□No	
8.	a. Does command have a written Hazardous Substance Program for substances used within that command?					CORRECTED	
						✓ Yes	□ No
	('	1)	Are hazardous substances identified and properly labeled?			✓ Yes	□No
	(2	2)	Warning signs posted?			✓ Yes	□No
	(3	3)	Material Safety Data Sheets readily available?			✓ Yes	□No
	(4	4)	Employees receive training?	-		✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

5) Training documented?			✓ Yes	□ No
(6) Employees informed of their right to applicable medical and exposure information?		✓ Yes	☐ No	
ARDOUS EXPOSURE CONTROL PROGRAMS	Yes EVALUATED	No ACTION REQUIRED	CORRECTED	
a. Activities identified within command that may require exposure to hazardous conditions?  (1) Appropriate engineering and/or administrative controls implemented?				
(3) Employees trained on use and maintenance of equipment?			✓ Yes	□No
4) Training documented?			✓ Yes	□ No
	Employees informed of their right to applicable medic CARDOUS EXPOSURE CONTROL PROGRAMS Activities identified within command that may require exposure engineering and/or administrative control.  2) Protective equipment provided in accordance with bath and the provided in accordance with the provided in accordance wi	Employees informed of their right to applicable medical and exposure informated and exposure informate	Employees informed of their right to applicable medical and exposure information?  EVALUATED Yes ACTION REQUIRED NO  Activities identified within command that may require exposure to hazardous conditions?  1) Appropriate engineering and/or administrative controls implemented?  2) Protective equipment provided in accordance with bargaining unit agreements?  3) Employees trained on use and maintenance of equipment?	Employees informed of their right to applicable medical and exposure information?  Yes  CARDOUS EXPOSURE CONTROL PROGRAMS  Activities identified within command that may require exposure to hazardous conditions?  Yes  Activities identified within command that may require exposure to hazardous conditions?  Yes  Yes  Yes  Yes  Yes  Yes  EVALUATED Yes  Yes  Yes  Yes  Yes  Yes  EVALUATED Yes  Yes

#### AREA MANAGEMENT EVALUATION SUPPLEMENT

SECTIONS	COMMENTS		
4. C (2)-Minutes posted on Occupational	Minutes from the Quarterly Occupational Safety Board were not bei	ng posted on th	e Occupational
Safety Board?	Safety Board. This has been corrected.		
			m 1 0
5. I, 5. I (1), 5. I (2)-Injuries and	The folder containing the employees' CHP 442s had not been update		
accidents documented on CHP 442,	recognition emblem summary was prepared in 2001. The binder cor		
Individual Accident, Injury and Safety	been made current with all CHP 442s updated. A new Excel spreads		
Recognition Record? CHP442s current?	shows when an employee is due his or her next safety emblem. Safe		
Safety recognition emblem summary	on the current quarterly supply order to be provided to those employ	ees due awards.	
current?			
6. a (5)-Each employee completed CHP	There were several employees who had not completed the annual rev	view of the IIPF	. Those
712 A, Injury and Illness Prevention	employees were directed to read the Area IIPP and complete a new 7	712 A. All emp	loyees are now
Program Orientation and Review?	current.		
			_

# COMMAND INSPECTION PROGRAM SXCEPTIONS DOCUMENT

Woodland	Valley	12
Inspected by:	***************************************	Date:
Sergeant D. Sea	aman, #16370	05/12/2009

Chapter:

Division:

rage 1 of 3

number of the inspection in the Chapter shall be routed to and its due date. This improvement, identified deficiencies, co	Inspecti docume	on number. Under "Forwent shall be utilized to do	vard to:" enter the nea	Il in the blanks as indicated. Enter the chapte of level of command where the document actices, suggestions for statewide aused if additional space is required.
TYPE OF INSPECTION  Division Level Command I	_evel	Total hours expende inspection:	d on the	Corrective Action Plan Included
Executive Office Level		2		Attachments Included
Follow-up Required:	Forwa	rd to:		
☐ Yes	Due D	ate:		
Chapter Inspection:				
Inspector's Comments Regar	ding Ir	nnovative Practices	S:	
The Woodland Area maintains remain in compliance with GIS				
This includes the development ork environment for all employeerelated injuries and illness to the	oyees.	This program den	procedures whi nonstrates the A	ch will ensure a safe and healthy rea's commitment to reduce work
The Woodland Area plan also to work management program in order to prevent repetitive in	. The	Area also utilizes s	work related in ergeants to cor	juries through an effective return iduct accident and injury analysis
Command Suggestions for St	atewid	e Improvement:		
In 2007 -2008, the Woodland A	Area O	ccupational Safety	Coordinator co	nducted an in-denth analysis of

Command:

Inspector's Findings:

specific hazards that patrol officers could encounter (specific hazards are addressed in the Area's IIPP). After identifying these hazards, specific preemptive precautions were developed. These precautions include additional SROVT's (directly related to the Woodland Area), additional supervisory ride alongs, and open discussions during briefings/debriefings regarding any unusual encounter during the shift. This practice, which has proved successful in reducing injuries and collisions, could benefit commands

The Inspector found that the Woodland Area conformed to all the applicable health and safety quirements mandated by GISO 3203. Furthermore, the Woodland Area took innovation with enhancing the Departmental Occupational Safety Program by tailoring it to the specific potential hazards found within Yolo County.

statewide.

## COMMAND INSPECTION PROGRAM

**FXCEPTIONS DOCUMENT** 

Page 2 of 3

Command:	Division:	Chapter:
Woodland	Valley	12
Inspected by:	<u> </u>	Date:
Sergeant D. S	Seaman, #16370	05/12/2009

Commander's Respons	e:  Concur or  Do Not Concur (Do Not Concur shall document basis for response)
Inspector's Comments: etc.)	Shall address non concurrence by commander (e.g., findings revised, findings unchanged,

### **COMMAND INSPECTION PROGRAM TXCEPTIONS DOCUMENT**

Page 3 of 3

Command:	Division:	Chapter:
Woodland	Valley	12
Inspected by:		Date:
Sergeant D. S	seaman, #16370	05/12/2009

Required Action	
Corrective Action Plan/Timeline	

N/A

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE	DATE 5/14/09
	INSPECTOR'S SIGNATURE	S/12/09
☐ Reviewer discussed this report with employee ☐ Do not concur	REVIEWER'S SIGNATURE	DATE / 07/16/89

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

	WOODLAN	1D
AREA	DIVISION	NUMBER
280	Valley	
EVALUATED BY		DATE
Sergeant Dan S	Seaman, #16370	05/12/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

		LUATION  I Evaluation   Infor	mal Evaluation	SUSPENSE DATE			
		REQUIRED	☐ Correction Report	COMMANDER'S REVIEW		DATE	
☐ Y	es	☑ No		Contain Ileatoni		05/12/20	09
= UXUII		Vicarios filescope (1975)	BY	Captain [ketani	ACTION REQUIRED	CORRECTED	
1. GO	AL	S AND ACCOMPLISHME	ENTS	05/12/2009		1	
		he command familiar with fety Manual, Chapter 13?	the Occupational Safety Program	n as outlined in HPM 10.6	, Occupational	✓ Yes	□No
	(1)	Are goals developed in a	accordance with departmental pol	icy?		✓ Yes	□No
	(2)	Are environmental factor	rs, exposure factors, and past exp	perience/trends considere	d when setting goals?	✓ Yes	□No
	(3)	Are illness and non-serio	ous/non-traumatic injuries exclude	ed from occupational safe	ty goals?	✓ Yes	□No
	(4)	Are goals appropriately	categorized?			✓ Yes	□No
	(5)	Are goals realistic?				✓ Yes	□No
	(6)	Are goals consistent with	h departmental objectives?			✓ Yes	□ No
	(7)	Is input from all levels co	onsidered before goals are establi	shed?		✓ Yes	□No
b.	Are	goals being accomplishe	ed?			✓ Yes	□No
(	(1)	Accurate reporting on Cl	HP 113, Accident and Injury Repo	irt?		✓ Yes	□No
	(2)	Are accidents increasing	1?			Yes	✓ No
(	(3)	Are injuries increasing?				☐ Yes	☑ No
(	(4)	Why are they increasing	/decreasing? The Woodland Are	a is actively participating	g in Supervisory ride-a-l	ongs. Duri	ng the ride-a-
		longs, Sergeants are disc	cussing proper enforcement driving	ng as well as evaluating t	he officer's skills. The A	Area is also	stressing the
	>0C.T	importance of workplac	e safety and conducting investiga	tions on all preventable i	njuries.		
(	(5)	Is CHP 113, Accident an	d Injury Report, posted or readily	accessible?		✓ Yes	□No
(	(6)	Are employees knowledg	geable about goals and achievem	ents?		✓ Yes	□No
(	(7)	Are employees providing	suggestions toward goal attainm			✓ Yes	□No
2. PAF	RTIC	CIPATION		05/12/2009	ACTION REQUIRED	CORRECTE	
а. (	Con	nmander actively involved	in program?			✓ Yes	□No
(	1)	Commander active in inju	ury/illness case management?			✓ Yes	□No
(	2)	What is the commander's	s attitude regarding occupational	safety? The Commande	r is committed to ensuring	ng that all V	Voodland
1		Area employees perform	n their jobs with safety in mind.				

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(**************************************				
(3	) Occupational safety issues discussed at staff meetings and	training days?		✓ Yes	□No
(4	) Are safety issues in the meeting minutes?			Yes	□No
(5	) Commander comments regarding safety issues in performa	nce evaluations?		✓ Yes	□No
(6	) Does the commander ensure use of appropriate safety equi	ipment?		✓ Yes	□No
b. A	re managers/supervisors actively involved in the program?			✓ Yes ·	□No
(1	) Are managers/supervisors involved in case management?			✓ Yes	□No
(2	) Do they have the appropriate attitude?			✓ Yes	□No
(3	) Are managers monitoring supervisors' progress and efforts	to attain goals?		✓ Yes	□No
(4	) Are supervisors monitoring employees' efforts?			√ Yes	□No
(5	) Do managers comment on safety issues in performance eva	aluations?		✓ Yes	□No
(6)	) Do supervisors comment on safety issues in performance e	valuations?		✓ Yes	□No
(7)	) Do managers/supervisors ensure the use of proper safety e	quipment?		✓ Yes	□No
c. Ar	e employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
(1)	Are employees involved in their case management?			✓ Yes	□No
(2)	Are employees knowledgeable about safety goals?			✓ Yes	□No
(3)	Are they aware of the command's achievements?			✓ Yes	□No
(4)	Are employees practicing safety while performing their dutie	s?		✓ Yes	□No
(5)	Are employees reporting unsafe conditions and/or work practical	ctices?		✓ Yes	□No
(6)	Do employees work cooperatively to minimize hazards?			✓ Yes	□No
(7)	Do employees offer suggestions to improve occupational sa	ifety?		✓ Yes	□No
(8)	Is employee equipment properly used and maintained?			✓ Yes	□No
3. ACCII	DENT AND INJURY TRENDS	05/12/2009	ACTION REQUIRED	CORRECTE	)
a. Co	ommander's method of identifying trends? The Commander ex	valuates all accident a	nd injury trends to seek a	ny methods	of
in	provement. If a trend is identified, the Commander takes app	propriate action to min	imize any potential of re	currence.	
(1)	Are accidents and injuries being monitored to identify trends			✓ Yes	□No
(2)	Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior med	Accident and Injury Re eting minutes?	port, OSHA 300,	✓ Yes	□No
(3)	Are personnel in the command aware of current and potenti	al trends?		✓ Yes	□ No
b. Wh	nat corrective action has the command taken when a trend ha	s been identified?  En	ployees are briefed on th	e existence	of a trend and
ev	ery employee is trained on how to minimize any recurrence.				

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1)	Are commanders, managers, and supervisors actively imp			☑ Yes	□No
COMM	IAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	05/12/2009	ACTION REQUIRED	CORRECTED	
a. Wh	nat is the composition of the COSC? The COSC is composed	ed of The Area Comma	nder, Occupational Safety	Sergeant, fro	nt desk
off	icer, ASM, Maintenance Worker, and OSS1				
(1)	Is there representation from each collective bargaining uni	<del>1</del> 2		✓ Yes	□ No
(2)	Management and supervisory representation?			✓ Yes	□No
(3)	Command Safety Coordinator assigned?			✓ Yes	□No
(4)	Command Safety Coordinator active and effective?			✓ Yes	□No
				✓ Yes	□No
(6)	COSC meetings held quarterly?			✓ Yes	□No
	Are meetings held more frequently when goals are not bei	ng attained?		✓ Yes	□No
(8)	Do all committee members attend the meetings?			✓ Yes	□ No
	roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
(1)	Do committee members understand their roles and respon			✓ Yes	☐ No
	Is an agenda prepared prior to the meeting?			✓ Yes	☐ No
	Are departmental and Division Occupational Safety meeting	ngs minutes readily ava	ailable?	✓ Yes	□No
	Are these minutes utilized for Area meetings?	,		✓ Yes	☐ No
	Are assignments given during Area meetings?			✓ Yes	□No
	utes prepared for the COSC meeting?			✓ Yes	□No
	Recording secretary appointed?			✓ Yes	☐ No
(2)	Minutes posted on command's Occupational Safety Board	?		✓ Yes	☐ No
	Are minutes included in IIPP file?			✓ Yes	☐ No
	Minutes maintained current year, plus three?			✓ Yes	□No
	Minutes forwarded through channels?			✓ Yes	□No
	ne COSC effective?			✓ Yes	□No
	Are COSC recommendations clear, concise and pertinent	to the command?		✓ Yes	☐ No
	COSC proactive to eliminate potential causes of accidents			✓ Yes	□No
	COSC disseminate current information and training regard		ssues?	✓ Yes	☐ No
	all personnel receive current information regarding health a			✓ Yes	□No
	butside agency safety programs utilized as a resource?	<u> </u>		✓ Yes	□ No
	s the command maintain an effective health and safety cor	nmunications system?		✓ Yes	☐ No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CIT	11F 455W (17e4: 5-00) OF 1 009			
	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?		✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to po	olicy?	✓ Yes	□No
_	(3) Do all members of the command participate in distribution of safety and health informati	on?	✓ Yes	□No
	(4) COSC minutes posted in a timely manner?		✓ Yes	□ No
	(5) Required posters prominently displayed?		✓ Yes	□ No
	(6) COSC maintain the Command Occupational Safety Bulletin Board?		✓ Yes	□ No
	(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to spe	cific members?	✓ Yes	☐ No
5.	DOCUMENTATION EVALUATED AC 05/12/2009	TION REQUIRED	CORRECTED	)
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed an filed in the employee's field folder?	nually and	✓ Yes	□No
l	b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information request driver's license record check and filed in the employee's field folder?	ation, utilized	✓ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?		✓ Yes	□No
	(1) Are required injuries and illnesses logged?		✓ Yes	□No
	(2) Entries made within six working days of notification of an employee injury or illness?		✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?		✓ Yes	□No
	(4) Retention according to policy?		✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?		✓ Yes	□No
	(6) Previous calendar year log posted during February?		√ Yes	□No
c	d. Are CHP 113s, Accident and Injury Report, compiled accurately?		✓ Yes	□No
	(1) Commander review and sign?		✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner?		√ Yes	□No
е	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?		✓ Yes	□No
	(1) Are semiannual safety inspections conducted?		√ Yes	□No
	(2) Are safety hazards identified?		✓ Yes	□No
	(3) Is corrective action taken within 30 days?		✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to	policy?	✓ Yes	□No
f.	f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?		✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?		✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?		✓ Yes	□No
g	g. Are the CHP 121 series thoroughly and accurately completed?		✓ Yes	□No
	(1) Supervisory comments in-depth, clear, and concise?		✓ Yes	□No
	(2) Commander signature on appropriate forms?	ÿ.	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(3) Routed within time frames?			✓ Yes	□No
	h. Is CHP 208, Accident Prevention Report, thoroughly and accurately of	completed?		✓ Yes	□No
_	(1) Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
	(2) Commander review?			✓ Yes	□No
	(3) Commander signs appropriate form?			✓ Yes	□No
	(4) Properly routed within time limits?			✓ Yes	□No
	i. Are injuries and accidents documented on CHP 442, Individual Accide	ent, Injury and Safe	y Recognition Record?	✓ Yes	□No
	(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition	n Record, current?	я	✓ Yes	□No
	(2) Safety recognition emblem summary current?			✓ Yes	□No
	j. Are CHP 712As, Injury and Illness Prevention Program Orientation and	d Review, kept curr	ent?	✓ Yes	□No
	(1) Is specific safety training documented on CHP 712, Employee Er	mergency Action PI	an Review?	✓ Yes	□No
	(2) Copies maintained with IIPP file?			✓ Yes	□No
6.	IN IT IDV AND IT I NESS DREVENTION DROCDAM	UATED 12/2009	ACTION REQUIRED	CORRECTED	)
	a. Command specific IIPP on file?			✓ Yes	□No
	(1) Is the program effective?			✓ Yes	□No
	(2) Contains all required documents?			✓ Yes	□No
	(3) Discussed with all employees?			✓ Yes	□No
	(4) All employees understand their roles and responsibilities?			✓ Yes	☐ No
	(5) Each employee completed CHP 712A, Injury and Illness Preventi	on Program Orient	ation and Review?	✓ Yes	□No
	(6) New employees review and complete CHP 712A, Injury and Illnes and Review?	ss Prevention Prog	am Orientation	✓ Yes	□No
	(7) Are unsafe hazards or conditions identified, investigated, correcte	ed, and documented	1?	√ Yes	□No
	(8) Is required documentation maintained according to policy?			✓ Yes	□No
7.	COMMANDATION MATH DOCK	UATED 2/2009	ACTION REQUIRED	CORRECTED	)
	a. Employees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b. Command's documents readily available for review by DOSH Complia	ance Officer?		✓ Yes	□No
8.	HAZADDOUS SUBSTANCE DEOCDAM	uated 2/2009	ACTION REQUIRED	CORRECTED	)
	a. Does command have a written Hazardous Substance Program for sub	ostances used with	n that command?	✓ Yes	□No
	(1) Are hazardous substances identified and properly labeled?			✓ Yes	□No
	(2) Warning signs posted?			✓ Yes	□No
2	(3) Material Safety Data Sheets readily available?			✓ Yes	□No
	(4) Employees receive training?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

•		. (* 1.5 - 1.				
	(5)	Training documented?			✓ Yes	□No
	(6)	Employees informed of their right to applicable medica	al and exposure informati	on?	✓ Yes	□No
9. H	IAZAI	RDOUS EXPOSURE CONTROL PROGRAMS	05/12/2009	ACTION REQUIRED	CORRECTED	)
а	. Act	tivities identified within command that may require expo	sure to hazardous conditi	ions?	✓ Yes	□No
	(1)	Appropriate engineering and/or administrative controls	s implemented?		✓ Yes	□No
	(2)	Protective equipment provided in accordance with bar	gaining unit agreements?	?	Yes	□No
_	(3)	Employees trained on use and maintenance of equipm	nent?		✓ Yes	□No
	(4)	Training documented?			✓ Yes	□No

### COMMAND INSPECTION PROGRAM

#### "XCEPTIONS DOCUMENT

Command: Truckee	Division: Valley	Chapter: Chapter 12, Occupational Safety
Inspected by:		Date:
Sergeant Ste	eve Bryan, #10527	03/17/2009

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans, and may be used to appeal findings. A CHP 51 Memorandum may be used if additional space is required.

TYPE OF INSPECTION		☐ Corrective Action Plan Included	
Division Level 🛛 Comma	nd Level	Appeal Included	
☐ Executive Office Level		☐ Attachments Included	
Follow-up Required:	Forward to: Valley Division	Commander/s Signature:	Date:
☐ Yes	Due Date: 03/31/2009	Nay Kord	03/18/2009
Chapter Inspection:			
Inspector's Comments Re	garding Innovative Practic	es:	

#### Command Suggestions for Statewide Improvement:

The first question on the CHP 453M, 1. Goals and Accomplishments, a. Is the command familiar with the Occupational Safety Program as outlined in HPM 10.6, Occupational Safety Manuel, Chapter 13. The current manual in the publications web site has only 11 chapters. The form needs to be up dated and coincide with the current Command Inspections Program.

#### Inspector's Findings:

- 1. a. The current manual in the publications web site has only 11 chapters.
- 4. a. (5) The Truckee area in the past has obtained personnel on duty to attend the COSC meetings, normally representing the different bargaining units.
- 4. a. (6) During 2008 the Truckee Area held two COSC meetings, one in the second quarter and one in the fourth quarter. Missed were the first and third quarters.
- a. (8) Not all personnel invited to attend the meetings would attend due to scheduling issues and no overtime allowed.

# COMMAND INSPECTION PROGRAM FXCEPTIONS DOCUMENT

age 2

Command: Truckee	Division: Valley	Chapter: Chapter 3, Cal-Card Program
Inspected by:		Date:
Sergeant Ste	ve Bryan, #10527	11/28/2008

5. f. The Truckee Area has had no CHP 113B's completed by any employees in recent years

#### Commander's Response:

The Commander has had the Occupational Safety Committee Sergeant prepare a schedule of meetings for the 2009 year. The CSOC meetings are scheduled for March 18, 2009, May 5, 2009, August 18, 2009 and November 17, 2009. The Commander and the Occupational Safety Committee Sergeant have put together a COSC with the membership being for a period of one year. All of the bargaining units are represented in the CSOC.

#### Inspector's Comments:

The Area Commander upon learning of the above deficiencies immediately acted to correct them.

#### **Required Action**

#### Corrective Action Plan/Timeline

The above listed deficiencies were corrected immediately by the Area Commander. A schedule of CSOC has been established and all efforts will be made to have all members attend.

No further action necessary.

# **COMMAND INSPECTION PROGRAM**"XCEPTIONS DOCUMENT

age 3

Command: Truckee	Division: Valley	Chapter: Chapter 3, Cal-Card Program
Inspected by: Sergeant Ste	ve Bryan, #10527	Date: 11/28/2008

Commander's Basis for Appeal:	
Appeal Review/Decision: (This shall be the only level of app	peal).
Lead Inspector's Signature:	Date:
Responding Commander's Signature (for appeal):	Date:

Appeal Process: (Appeals shall be filed within five (5) business days of the completed chapter inspection).

### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

HP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Truckee	Valley	222
EVALUATED BY	- Upon - November - Company	DATE
Sergeant Steve Bryar	10527	03/17/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVA		mal Evaluation	SUSPENSE DATE			
FOLLOW-UP  Yes	REQUIRED No	☐ Correction Report	COMMANDER'S REVIEW	Que .	03/18/20	009
1. GOAL	S AND ACCOMPLISHME	ENTS	Yes /	ACTION REQUIRED	CORRECTE	D
	the command familiar with fety Manual, Chapter 13?	the Occupational Safety Progra	m as outlined in HPM 10.	6, Occupational	☐ Yes	☑ No
(1)	Are goals developed in a	accordance with departmental po	blicy?		✓ Yes	□No
(2)	Are environmental factor	rs, exposure factors, and past ex	perience/trends consider	ed when setting goals?	✓ Yes	□No
(3)	Are illness and non-serio	ous/non-traumatic injuries exclud	ed from occupational safe	ety goals?	✓ Yes	□No
(4)	Are goals appropriately	categorized?			✓ Yes	□No
(5)	Are goals realistic?				☑ Yes	□No
(6)	Are goals consistent with	n departmental objectives?				□No
(7)	Is input from all levels co	nsidered before goals are establ	lished?		☑ Yes	□No
b. Are	goals being accomplishe	d?			✓ Yes	□No
(1)	Accurate reporting on Ch	HP 113, Accident and Injury Rep	ort?		✓ Yes	□No
(2)	Are accidents increasing	?			✓ Yes	□No
(3)	Are injuries increasing?				☐ Yes	✓ No
(4)	Why are they increasing/	decreasing? The areas recordat	ole accidents are at 8 for t	he year with only I beir	ng preventab	le. Accidents
	trends go up or down in	the area based on the number an	d intensity of storms.			
(5)	Is CHP 113, Accident and	d Injury Report, posted or readily	accessible?		✓ Yes	□No
(6)	Are employees knowledg	eable about goals and achieven	nents?		✓ Yes	□No
(7)	Are employees providing	suggestions toward goal attainm	nent?		✓ Yes	□No
. PARTIC	CIPATION		evaluated Yes	ACTION REQUIRED No	CORRECTED	
a. Com	ımander actively involved	in program?			✓ Yes	□No
(1)	Commander active in inju	ıry/illness case management?			✓ Yes	□No
(2)	What is the commander's	attitude regarding occupational	safety? The Truckee Ar	ea Commander is proact	tive with the	Occ. Safety
	program. The Command	ler assigns area personnel to put	together a Occ. Safety Po	osters and meetings on a	regular bas	is.

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

\$HP 453M (Rev. 5-06) OPI 00
------------------------------

PHP	453N	/I (Rev. 5-06) OPI 009				
	(3)	Occupational safety issues discussed at staff meetings and	training days?		✓ Yes	□No
	(4)	Are safety issues in the meeting minutes?			✓ Yes	□No
	(5)	Commander comments regarding safety issues in performa	nce evaluations?		✓ Yes	□No
	(6)	Does the commander ensure use of appropriate safety equi	ipment?		✓ Yes	□No
b.	Аге	e managers/supervisors actively involved in the program?			✓ Yes	□No
	(1)	Are managers/supervisors involved in case management?			√ Yes	□No
	(2)	Do they have the appropriate attitude?			✓ Yes	□ No
	(3)	Are managers monitoring supervisors' progress and efforts	to attain goals?		√ Yes	□No
	(4)	Are supervisors monitoring employees' efforts?			✓ Yes	□No
	(5)	Do managers comment on safety issues in performance evo	aluations?		✓ Yes	□No
	(6)	Do supervisors comment on safety issues in performance e	valuations?		✓ Yes	□No
	(7)	Do managers/supervisors ensure the use of proper safety e	quipment?		✓ Yes	□No
C.	Are	employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
	(1)	Are employees involved in their case management?			✓ Yes	□No
	(2)	Are employees knowledgeable about safety goals?			✓ Yes	□No
	(3)	Are they aware of the command's achievements?			√ Yes	□No
	(4)	Are employees practicing safety while performing their dutie	s?		Yes	□No
	(5)	Are employees reporting unsafe conditions and/or work practical	ctices?		✓ Yes	□No
	(6)	Do employees work cooperatively to minimize hazards?			✓ Yes	□No
	(7)	Do employees offer suggestions to improve occupational sa	fety?		Yes	□No
	(8)	Is employee equipment properly used and maintained?			✓ Yes	□No
3. AC	CID	ENT AND INJURY TRENDS	Yes Yes	No.	CORRECTE	)
а.	Con	nmander's method of identifying trends? Review all employe			rsonnel bot	th uniformed
	and	non-uniformed driving state vehicles.				
	(1)	Are accidents and injuries being monitored to identify trends	?		✓ Yes	□No
		Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior mee		port, OSHA 300,	✓ Yes	□No
	(3)	Are personnel in the command aware of current and potentia	al trends?		Yes	□No
b.	Wha	at corrective action has the command taken when a trend has	s been identified? Co	rrective measures are imp	lemented ar	nd discussed
	at tr	aining days, briefings, and immediate actions taken when ide	ntified.			

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Are commanders, managers, and supervisors ac	ctively impl			✓ Yes	□No
4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (	COSC)	Yes	Yes	Yes	
a. What is the composition of the COSC? Sergeant, Ca	aptain, Dis <sub>l</sub>	patch. Clerical and	ASM.		
(1) Is there representation from each collective barg-	aining unit	?		✓ Yes	□No
(2) Management and supervisory representation?				✓ Yes	□No
(3) Command Safety Coordinator assigned?				✓ Yes	□No
(4) Command Safety Coordinator active and effective	/e?			✓ Yes	□No
(5) Are committee assignments rotated?					□No
(6) COSC meetings held quarterly?				☐ Yes	☑ No
(7) Are meetings held more frequently when goals at	re not bein	g attained?		☑ Yes	□No
(8) Do all committee members attend the meetings?				☐ Yes	☑ No
b. Are roles and responsibilities defined in accordance v	with IIPP?			☑ Yes	□No
(1) Do committee members understand their roles ar	nd respons	sibilities?		✓ Yes	□No
(2) Is an agenda prepared prior to the meeting?				✓ Yes	□No
(3) Are departmental and Division Occupational Safety meetings minutes readily available?			✓ Yes	□No	
(4) Are these minutes utilized for Area meetings?				✓ Yes	□No
(5) Are assignments given during Area meetings?					□No
c. Minutes prepared for the COSC meeting?				☑ Yes	□No
(1) Recording secretary appointed?				✓ Yes	□No
(2) Minutes posted on command's Occupational Safe	ety Board?			✓ Yes	□No
(3) Are minutes included in IIPP file?				✓ Yes	□No
(4) Minutes maintained current year, plus three?				✓ Yes	□No
(5) Minutes forwarded through channels?				✓ Yes	□No
d. Is the COSC effective?				✓ Yes	□No
(1) Are COSC recommendations clear, concise and p	pertinent to	the command?		☑ Yes	□No
(2) COSC proactive to eliminate potential causes of a	accidents a	and injuries?		✓ Yes	□No
(3) COSC disseminate current information and training	ng regardir	ng health and safet	y issues?	✓ Yes	□No
e. Do all personnel receive current information regarding	health an	d safety?		✓ Yes	□No
f. Are outside agency safety programs utilized as a resou	urce?			✓ Yes	□No
g. Does the command maintain an effective health and s	safety com	munications systen	n?	✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	,,				
(1)	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?			✓ Yes	□No
(2)	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?			✓ Yes	□No
(3)	(3) Do all members of the command participate in distribution of safety and health information?			✓ Yes	□No
(4)	(4) COSC minutes posted in a timely manner?			✓ Yes	□No
(5)	Required posters prominently displayed?			✓ Yes	□No
(6)	COSC maintain the Command Occupational Safety Bulletin	Board?		✓ Yes	□No
(7)	Are responsibilities for the Occupational Safety Bulletin Boa	rd contents assigned to s	specific members?	✓ Yes	□No
5. DOCUM	ENTATION	evaluated Yes	ACTION REQUIRED No	CORRECTED	)
	261s, Authorization to Use Privately Owned Vehicles on Stain the employee's field folder?	ate Business, completed	annually and	✓ Yes	□No
	INF 254, Government Agency Request for Driver License/liquest driver's license record check and filed in the employee		rmation, utilized	✓ Yes	□No
c. OSH	A 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No
(1)	Are required injuries and illnesses logged?			✓ Yes	□No
(2) E	(2) Entries made within six working days of notification of an employee injury or illness?				□No
(3) Is lost-time and limited-duty documentation accurate?				✓ Yes	□No
(4) F	(4) Retention according to policy?				□No
(5) F	(5) Readily accessible for review by Cal-OSHA?				
(6) Previous calendar year log posted during February?				✓ Yes	□No
d. Are CHP 113s, Accident and Injury Report, compiled accurately?				✓ Yes	□No
(1) Commander review and sign?				✓ Yes	□No
(2) CHP 113s and attachments processed in a timely manner?			✓ Yes	□No	
e. Does	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?			✓ Yes	□No
(1) A	(1) Are semiannual safety inspections conducted?			✓ Yes	□No
(2) A	(2) Are safety hazards identified?			✓ Yes	□No
(3) Is	(3) Is corrective action taken within 30 days?			✓ Yes	□No
(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?			✓ Yes	□No	
f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?			☐ Yes	☑ No	
(1) M	(1) Measures taken to correct situation within 30 days?			☐ Yes	☑ No
(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?				☐ Yes	☑ No
g. Are the CHP 121 series thoroughly and accurately completed?				✓ Yes	□No
(1) Si	upervisory comments in-depth, clear, and concise?			√ Yes	□No
(2) C	ommander signature on appropriate forms?	150-11		✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

yΠ	F 455IV	1 (Rev. 5-06) OF1 009				
	(3)	Routed within time frames?	·		✓ Yes	□ No
	h. Is	CHP 208, Accident Prevention Report, thoroughly and accura	itely completed?		✓ Yes	□ No
	(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□ No
	(2)	Commander review?			✓ Yes	□No
	(3)	Commander signs appropriate form?			✓ Yes	□No
	(4)	Properly routed within time limits?			√ Yes	□No
	i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?					□No
(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?					Yes	□No
	(2)	Safety recognition emblem summary current?			✓ Yes	□No
- 00	j. Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, kept o	current?	√ Yes	□No
	(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Action	Plan Review?	✓ Yes	□No
	(2)	Copies maintained with IIPP file?			✓ Yes	□No
6.	INJUR	Y AND ILLNESS PREVENTION PROGRAM	EVALUATED Yes	ACTION REQUIRED	CORRECTE	0
	a. Coi	mmand specific IIPP on file?			✓ Yes	□No
	(1) Is the program effective?					□No
	(2) Contains all required documents?				✓ Yes	□No
	(3) Discussed with all employees?				✓ Yes	□No
	(4) All employees understand their roles and responsibilities?					□No
	(5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?					□No
	(6)	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention P	rogram Orientation	✓ Yes	□No
	(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and docume	nted?	✓ Yes	□No
	(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	COMM	UNICATION WITH DOSH	EVALUATED Yes	ACTION REQUIRED	CORRECTE	D
- 6	a. Em	ployees aware of procedures regarding DOSH inspections?	100,000		✓ Yes	□No
ŀ	o, Cor	mmand's documents readily available for review by DOSH Co	ompliance Officer?		✓ Yes	□No
B. I	HAZAR	RDOUS SUBSTANCE PROGRAM	Yes	ACTION REQUIRED No	CORRECTE	0
a	a. Doe	es command have a written Hazardous Substance Program f	for substances used v	vithin that command?	✓ Yes	□No
(1) Are hazardous substances identified and properly labeled?				✓ Yes	□No	
(2) Warning signs posted?				✓ Yes	□No	
	(3)	Material Safety Data Sheets readily available?			✓ Yes	□No
	(4)	Employees receive training?			√ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

7 (C (C				
(5) Training documented?			✓ Yes	□No
(6) Employees informed of their right to applicable medical and exposure information?			✓ Yes	□No
9. HAZARDOUS EXPOSURE CONTROL PROGRAMS    EVALUATED   ACTION REQUIRED   Yes   No				D
a. Activities identified within command that may requ	✓ Yes	□No		
(1) Appropriate engineering and/or administrative controls implemented?				□ No
(2) Protective equipment provided in accordance with bargaining unit agreements?				□No
(3) Employees trained on use and maintenance of equipment?			Yes	□No
(4) Training documented?			✓ Yes	□No

### **COMMAND INSPECTION PROGRAM**

### **FXCEPTIONS DOCUMENT**

ŕ	ag	е	1	of	3

Command:	Division:	Chapter:
TRACY	VALLEY	Ch. 12
Inspected by:		Date:
SGT PAT W	HITE	April 1, 2009

TYPE OF INSPECTION  Division Level Command Level  Executive Office Level  Total hours expended on the inspection:  Total hours expended on the inspection:  Attachments Included	INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans. A CHP 51 Memorandum may be used if additional space is required.					
	<del>-</del>					
Follow-up Required:  Forward to:  VALLEY Division	ollow-up Requirea:					
☐ Yes ☑ No Due Date:	Yes ⊠ No					
Chapter Inspection:12	oter Inspection:12					
Inspector's Comments Regarding Innovative Practices:	ector's Comments Regard					
Command doesn't incorporate any innovative practices related to occupational safety.						
Command Suggestions for Statewide Improvement:	mand Suggestions for Sta					
one.	o aggoonomo for ota					
Inspector's Findings:						
Tracy Area through various media (briefings, 100 forms, and training days) keeps the entire command informed of ways to continue to make their working environments safer.						
Commander's Response: ☐ Concur or ☐ Do Not Concur (Do Not Concur shall document basis for response)	 nander's Response: ⊠ C					
The second secon						

Dist are a straight

nspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

### COMMAND INSPECTION PROGRAM TXCEPTIONS DOCUMENT

Page 2 of 3

Command: TRACY	Division: VALLEY	Chapter: Ch. 12
Inspected by: SGT PAT WH	ITE	Date: April 1, 2009

# COMMAND INSPECTION PROGRAM FXCEPTIONS DOCUMENT

Page 3 of 3

Command: TRACY	Division: VALLEY	Chapter: Ch. 12
Inspected by: SGT PAT WHI	ΓΕ	Date: April 1, 2009

Required Action	
Corrective Action Plan/Timeline	

Employee would like to discuss this report with the reviewer. (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE  LL WLT Sor WERTHINTE  INSPECTOR'S SIGNATURE	DATE 6 2 09 DATE
Reviewer discussed this report with employee Do not concur	REVIEWER'S SIGNATURE	7/2/19

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER	
Tracy	Valley	266	
EVALUATED BY		DATE	
P.L. White		04/01/09	

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluation  Informal Evaluation	SUSPENSE DATE 04/14/2009				
FOLLOW-UP REQUIRED  Correction Report  Separation Separ	COMMANDER'S REVIEW		DATE 4-	10-09	
1. GOALS AND ACCOMPLISHMENTS	04/01/2009	ACTION REQUIRED No	CORRECTE	ORRECTED:	
Is the command familiar with the Occupational Safety Program     Safety Manual, Chapter 13?	m as outlined in HPM 1	0.6, Occupational	✓ Yes	□No	
(1) Are goals developed in accordance with departmental po	licy?		✓ Yes	□No	
(2) Are environmental factors, exposure factors, and past ex	perience/trends consid	ered when setting goals?	✓ Yes	□No	
(3) Are illness and non-serious/non-traumatic injuries exclude	ed from occupational s	afety goals?	✓ Yes	□No	
(4) Are goals appropriately categorized?			✓ Yes	□No	
(5) Are goals realistic?			✓ Yes	□No	
(6) Are goals consistent with departmental objectives?			✓ Yes	□No	
(7) Is input from all levels considered before goals are estable	ished?		✓ Yes	□No	
b. Are goals being accomplished?			✓ Yes	□No	
(1) Accurate reporting on CHP 113, Accident and Injury Repo	ort?		✓ Yes	□No	
(2) Are accidents increasing?			☐ Yes	☑ No	
(3) Are injuries increasing?			☐ Yes	☑ No	
(4) Why are they increasing/decreasing?					
(5) Is CHP 113, Accident and Injury Report, posted or readily	accessible?		✓ Yes		
(6) Are employees knowledgeable about goals and achievem			 ✓ Yes	□No	
(7) Are employees providing suggestions toward goal attainm			 ✓ Yes	 □ No	
2. PARTICIPATION	04/01/09	ACTION REQUIRED	CORRECTEL		
a. Commander actively involved in program?	a. Commander actively involved in program?				
(1) Commander active in injury/illness case management?	(1) Commander active in injury/illness case management?			□No	
(2) What is the commander's attitude regarding occupational	safety? The command	der is VERY proactive rega	rding occup	pational	
safety. She emphasis occ safety at all briefings she attended	ds and during monthly	staff meetings.			

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

	(3) Occupational safety issues discussed at staff meetings and training days?	✓ Yes	□No
	(4) Are safety issues in the meeting minutes?	✓ Yes	□No
	(5) Commander comments regarding safety issues in performance evaluations?	✓ Yes	□No
	(6) Does the commander ensure use of appropriate safety equipment?	✓ Yes	□No
t	o. Are managers/supervisors actively involved in the program?	✓ Yes	□No
	(1) Are managers/supervisors involved in case management?	✓ Yes	□No
	(2) Do they have the appropriate attitude?	✓ Yes	□No
	(3) Are managers monitoring supervisors' progress and efforts to attain goals?	✓ Yes	□No
	(4) Are supervisors monitoring employees' efforts?	✓ Yes	□No
	(5) Do managers comment on safety issues in performance evaluations?	✓ Yes	□No
	(6) Do supervisors comment on safety issues in performance evaluations?	✓ Yes	□No
	(7) Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□No
C	. Are employees actively involved in the Occupational Safety Program?	✓ Yes	□No
	(1) Are employees involved in their case management?	✓ Yes	□No
	(2) Are employees knowledgeable about safety goals?	✓ Yes	□No
	(3) Are they aware of the command's achievements?	✓ Yes	□No
	(4) Are employees practicing safety while performing their duties?	✓ Yes	□No
	(5) Are employees reporting unsafe conditions and/or work practices?	✓ Yes	□No
	(6) Do employees work cooperatively to minimize hazards?	✓ Yes	□No
	(7) Do employees offer suggestions to improve occupational safety?	✓ Yes	□No
	(8) Is employee equipment properly used and maintained?	✓ Yes	□No
3. A	CCIDENT AND INJURY TRENDS EVALUATED ACTION REQUIRED NO	CORRECTED	
а.	Commander's method of identifying trends? Commander reviews and approves all paperwork regarding any ac	cidents or i	njuries. She
	reviews and approves all quarterly Occupational Safety meeting minutes, as well as CHP 113 and OSHA 300,	to identify t	trends.
	(1) Are accidents and injuries being monitored to identify trends?	✓ Yes	□No
	(2) Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 300, Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	✓ Yes	□No
	(3) Are personnel in the command aware of current and potential trends?	✓ Yes	□No
b.	What corrective action has the command taken when a trend has been identified? Briefing items of concern and	d conductin	g ride alongs
	with the officers identified.		

Destroy Previous Editions

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

EVALUATED ACTION REQUIRED CORRE	ED
4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC) 04/01/09 No	
a. What is the composition of the COSC? Commander, Sgt, Auto Tech, clerical, motor officer, road officer, special duty of	cer.
(1) Is there representation from each collective bargaining unit?	□ No
(2) Management and supervisory representation?	☐ No
(3) Command Safety Coordinator assigned?	☐ No
(4) Command Safety Coordinator active and effective?	☐ No
(5) Are committee assignments rotated?	□No
(6) COSC meetings held quarterly?	□No
(7) Are meetings held more frequently when goals are not being attained?	☑ No
(8) Do all committee members attend the meetings?	☐ No
b. Are roles and responsibilities defined in accordance with IIPP?	□No
(1) Do committee members understand their roles and responsibilities?	☐ No
(2) Is an agenda prepared prior to the meeting?	□No
(3) Are departmental and Division Occupational Safety meetings minutes readily available?	□No
(4) Are these minutes utilized for Area meetings?	□No
(5) Are assignments given during Area meetings?	□No
c. Minutes prepared for the COSC meeting?	□No
(1) Recording secretary appointed?	□No
(2) Minutes posted on command's Occupational Safety Board?	□No
(3) Are minutes included in IIPP file?	□No
(4) Minutes maintained current year, plus three?	□No
(5) Minutes forwarded through channels?	□No
d. Is the COSC effective?	□No
(1) Are COSC recommendations clear, concise and pertinent to the command?	☐ No
(2) COSC proactive to eliminate potential causes of accidents and injuries?	☐ No
(3) COSC disseminate current information and training regarding health and safety issues?	□No
e. Do all personnel receive current information regarding health and safety?	□No
f. Are outside agency safety programs utilized as a resource?	☑ No
g. Does the command maintain an effective health and safety communications system?	☐ No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

-	(1) Potential hazards reported on CHP 113B, Hazard Report/	Inspection?		✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?			✓ Yes	□No
	<ul><li>(3) Do all members of the command participate in distribution of safety and health information?</li><li>(4) COSC minutes posted in a timely manner?</li></ul>			✓ Yes	□No
				✓ Yes	□No
-	(5) Required posters prominently displayed?			✓ Yes	□No
V	(6) COSC maintain the Command Occupational Safety Bullet	in Board?		✓ Yes	□No
	(7) Are responsibilities for the Occupational Safety Bulletin Bo	pard contents assigned to	specific members?	☐ Yes	☑ No
5. i	DOCUMENTATION	04/01/09	No REQUIRED	CORRECTED	
a	STD 261s, Authorization to Use Privately Owned Vehicles on Siled in the employee's field folder?	State Business, complete	d annually and	☑ Yes	□No
t	<ul> <li>DMV INF 254, Government Agency Request for Driver License to request driver's license record check and filed in the employ</li> </ul>		ormation, utilized	☐ Yes	☑ No
C	. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No
	(1) Are required injuries and illnesses logged?			✓ Yes	□No
	(2) Entries made within six working days of notification of an e	employee injury or illness	?	✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No
	(4) Retention according to policy?			✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6) Previous calendar year log posted during February?			✓ Yes	□No
d	. Are CHP 113s, Accident and Injury Report, compiled accuratel	ly?		√ Yes	□No
	(1) Commander review and sign?			✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner	?		√ Yes	□No
е	Does the command utilize the CHP 113A, Safety Inspection Ch	hecklist?		✓ Yes	□No
	(1) Are semiannual safety inspections conducted?			✓ Yes	□No
	(2) Are safety hazards identified?			✓ Yes	□No
	(3) Is corrective action taken within 30 days?			✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with III	PP and retained according	ng to policy?	✓ Yes	□No
f.	Are unsafe conditions identified and documented on CHP 113B	, Hazard Report/Inspection	on?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?			√ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or atta	ached to IIPP?		☐ Yes	✓ No
g.	Are the CHP 121 series thoroughly and accurately completed?			✓ Yes	□No
_	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
	(2) Commander signature on appropriate forms?			✓ Yes	□No

## DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

#### **OCCUPATIONAL SAFETY**

		(3)	Routed within time frames?			✓ Yes	□No
5==	h. Is CHP 208, Accident Prevention Report, thoroughly and accurately completed?			✓ Yes	□No		
-		(1) Supervisor comments in-depth, clear, and concise?			✓ Yes	□No	
		(2) Commander review?			✓ Yes	□No	
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□No
	i.	Аге	injuries and accidents documented on CHP 442, Individual A	ccident, Injury an	d Safety Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, cu	rrent?	✓ Yes	□No
	(2) Safety recognition emblem summary current?			✓ Yes	□No		
	j.	Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, ke	ept current?	✓ Yes	□No
		(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Ac	tion Plan Review?	✓ Yes	□No
		(2)	Copies maintained with IIPP file?			✓ Yes	□No
6.	IN.	JUR	Y AND ILLNESS PREVENTION PROGRAM	04/01/09	ACTION REQUIRED	CORRECTED	
	а.	Cor	mmand specific IIPP on file?	10.0000	17072	✓ Yes	□ No
		(1)	Is the program effective?			✓ Yes	□No
-		(2)	Contains all required documents?			✓ Yes	□No
		(3)	Discussed with all employees?			✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?			✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program	Orientation and Review?	✓ Yes	□No
	(6) New employees review and complete CHP 712A, Injury and Illness Prevention Program Orientation and Review?				✓ Yes	□No	
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and docu	mented?	✓ Yes	□No
		(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	СО	MM	UNICATION WITH DOSH	04/01/09	ACTION REQUIRED	CORRECTE	)
	a.	Emp	oloyees aware of procedures regarding DOSH inspections?	0.00003	1000	✓ Yes	□No
ı	b.	Con	nmand's documents readily available for review by DOSH Co	mpliance Officer?		√ Yes	□No
8.	HA	ZAR	DOUS SUBSTANCE PROGRAM	04/01/09	ACTION REQUIRED	CORRECTED	0
á	<ul><li>a. Does command have a written Hazardous Substance Program for substances used within that command?</li><li>(1) Are hazardous substances identified and properly labeled?</li></ul>				✓ Yes	□No	
					✓ Yes	□No	
	(2) Warning signs posted?				✓ Yes	□No	
	(3) Material Safety Data Sheets readily available?				✓ Yes	□No	
	(4) Employees receive training?			✓ Yes	□No		

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(5) Training documented?			✓ Yes	□No
(6) Employees informed of their right to applicable medical and exposure information?				□No
. HAZARDOUS EXPOSURE CONTROL PROGRAMS  EVALUATED 04/01/09  ACTION REQUIRED No				D
a. Activities identified within command that may require expo	✓ Yes	□No		
(1) Appropriate engineering and/or administrative controls	✓ Yes	□ No		
(2) Protective equipment provided in accordance with bar	✓ Yes	□No		
(3) Employees trained on use and maintenance of equipment?				□No
(4) Training documented?		***	✓ Yes	□No
• •				

#### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Tracy	Valley	266
EVALUATED BY		DATE
P.L. White		04/01/09

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION Formal Eva		SUSPENSE DATE 04/14/2009		
FOLLOW-UP REQUIR	Correction Report  No  BY	COMMANDER'S REVIEW	100	OJ
1. GOALS AN	D ACCOMPLISHMENTS	evaluated action required No	CORRECTED	)
	ommand familiar with the Occupational Safety Program a Manual, Chapter 13?	as outlined in HPM 10.6, Occupational	✓ Yes	□No
(1) Are	goals developed in accordance with departmental policy	n	✓ Yes	□No
(2) Are	environmental factors, exposure factors, and past exper	rience/trends considered when setting goals?	✓ Yes	□No
(3) Are	illness and non-serious/non-traumatic injuries excluded	from occupational safety goals?		□No
(4) Are	goals appropriately categorized?		✓ Yes	□No
(5) Are	goals realistic?		✓ Yes	□No
(6) Are	goals consistent with departmental objectives?		✓ Yes	□No
(7) Is in	put from all levels considered before goals are establish	ed?	✓ Yes	□No
b. Are goal	s being accomplished?		✓ Yes	□No
(1) Acc	urate reporting on CHP 113, Accident and Injury Report?	?	✓ Yes	□No
(2) Are	accidents increasing?		☐ Yes	✓ No
(3) Are	injuries increasing?		☐ Yes	☑ No
(4) Why	are they increasing/decreasing?			
(5) Is CI	HP 113, Accident and Injury Report, posted or readily ac	ccessible?	✓ Yes	□No
	employees knowledgeable about goals and achievemen	411	✓ Yes	□No
	employees providing suggestions toward goal attainmen		✓ Yes	 No
e Garage de Carada	PARTICIPATION  EVALUATED   ACTION REQUIRED   No			0
a. Comman	der actively involved in program?		✓ Yes	□No
(1) Com	mander active in injury/illness case management?		✓ Yes	□No
(2) Wha	t is the commander's attitude regarding occupational sat	fety? The commander is VERY proactive reg	arding occu	pational
safet	y. She emphasis occ safety at all briefings she attends	and during monthly staff meetings.		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(3) Occupational safety issues discussed at staff meeting	ngs and training days?		✓ Yes	□No
	(4) Are safety issues in the meeting minutes?			✓ Yes	□No
	(5) Commander comments regarding safety issues in po	erformance evaluations?		✓ Yes	□No
	(6) Does the commander ensure use of appropriate safe	ety equipment?		✓ Yes	□No
b.	. Are managers/supervisors actively involved in the progra	am?		✓ Yes	□No
	(1) Are managers/supervisors involved in case manage	ment?		✓ Yes	□No
	(2) Do they have the appropriate attitude?			✓ Yes	□No
	(3) Are managers monitoring supervisors' progress and	efforts to attain goals?		✓ Yes	□No
	(4) Are supervisors monitoring employees' efforts?		3	✓ Yes	□No
	(5) Do managers comment on safety issues in performa	ance evaluations?		✓ Yes	□No
	(6) Do supervisors comment on safety issues in perform	nance evaluations?	51	✓ Yes	□No
	(7) Do managers/supervisors ensure the use of proper	safety equipment?		✓ Yes	□No
C.	Are employees actively involved in the Occupational Safe	ety Program?		✓ Yes	□No
	(1) Are employees involved in their case management?			✓ Yes	□No
	(2) Are employees knowledgeable about safety goals?			✓ Yes	□No
1	(3) Are they aware of the command's achievements?			✓ Yes	□No
	(4) Are employees practicing safety while performing the	eir duties?		✓ Yes	□No
	(5) Are employees reporting unsafe conditions and/or w	ork practices?		✓ Yes	□No
	(6) Do employees work cooperatively to minimize hazar	ds?		✓ Yes	□No
	(7) Do employees offer suggestions to improve occupat	ional safety?		✓ Yes	□No
	(8) Is employee equipment properly used and maintaine	ed?		✓ Yes	□No
3. AC	CCIDENT AND INJURY TRENDS	EVALUATED 4/1/09	ACTION REQUIRED	CORRECTE	Ď
a.	Commander's method of identifying trends? Commande	L-27 (760,000 L	E3182	idents or	injuries. She
	reviews and approves all quarterly Occupational Safety	meeting minutes, as well	as CHP 113 and OSHA 300, t	o identify	trends.
	(1) Are accidents and injuries being monitored to identify	y trends?		✓ Yes	□No
	(2) Is the Occupational Safety Committee reviewing CHI Log of Occupational Injuries and Illnesses, entries, p		y Report, OSHA 300,	✓ Yes	□No
	(3) Are personnel in the command aware of current and	potential trends?		✓ Yes	□No
b.	What corrective action has the command taken when a tr	rend has been identified?	Briefing items of concern and	l conductir	ng ride alongs
	with the officers identified.				

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(1) Are commanders, managers, and supervisors actively imp	elementing corrective	e actions?	✓ Yes	□No
4. (	COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	04/01/09	ACTION REQUIRED NO	CORRECTED	)
8	. What is the composition of the COSC? Commander, Sgt, Auto	o Tech, clerical, mo	tor officer, road officer, spec	cial duty office	er.
	(1) Is there representation from each collective bargaining uni	it?		✓ Yes	□No
	(2) Management and supervisory representation?			✓ Yes	□No
	(3) Command Safety Coordinator assigned?			✓ Yes	□No
	(4) Command Safety Coordinator active and effective?			✓ Yes	□No
	(5) Are committee assignments rotated?			✓ Yes	□No
	(6) COSC meetings held quarterly?			✓ Yes	□No
	(7) Are meetings held more frequently when goals are not being	ng attained?		☐ Yes	☑ No
	(8) Do all committee members attend the meetings?			✓ Yes	□No
b	Are roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
	(1) Do committee members understand their roles and respon	sibilities?		√ Yes	□No
	(2) Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3) Are departmental and Division Occupational Safety meeting	gs minutes readily	available?	✓ Yes	□No
	(4) Are these minutes utilized for Area meetings?				□No
	(5) Are assignments given during Area meetings?			✓ Yes	□No
C.	Minutes prepared for the COSC meeting?			✓ Yes	□No
	(1) Recording secretary appointed?			✓ Yes	□No
	(2) Minutes posted on command's Occupational Safety Board's	?		✓ Yes	□No
	(3) Are minutes included in IIPP file?			✓ Yes	□No
	(4) Minutes maintained current year, plus three?			✓ Yes	□No
	(5) Minutes forwarded through channels?			✓ Yes	□No
d.	Is the COSC effective?			✓ Yes	□No
	(1) Are COSC recommendations clear, concise and pertinent t	to the command?		Yes	□No
	(2) COSC proactive to eliminate potential causes of accidents	and injuries?		✓ Yes	□No
	(3) COSC disseminate current information and training regardi	ing health and safet	ty issues?	✓ Yes	□No
e.	Do all personnel receive current information regarding health ar	nd safety?		✓ Yes	□No
f.	Are outside agency safety programs utilized as a resource?			☐ Yes	☑ No
g.	Does the command maintain an effective health and safety com	nmunications syster	n?	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspe	Potential hazards reported on CHP 113B, Hazard Report/Inspection?				
	(2) Are findings of the 113B, Hazard Report/Inspection, report diss	Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?				
	(3) Do all members of the command participate in distribution of s	Do all members of the command participate in distribution of safety and health information?				
	(4) COSC minutes posted in a timely manner?	COSC minutes posted in a timely manner?				
	(5) Required posters prominently displayed?	Required posters prominently displayed?				
	(6) COSC maintain the Command Occupational Safety Bulletin Bo	✓ Yes	□No			
	(7) Are responsibilities for the Occupational Safety Bulletin Board	☐ Yes	☑ No			
5.	DOCUMENTATION	VALUATED 14/01/09	No REQUIRED	CORRECTED	)	
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State filed in the employee's field folder?	Business, complete	d annually and	✓ Yes	□No	
	<ul> <li>DMV INF 254, Government Agency Request for Driver License/Ide to request driver's license record check and filed in the employee's</li> </ul>		ormation, utilized	☐ Yes	<b>☑</b> No	
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No	
	(1) Are required injuries and illnesses logged?			✓ Yes	□No	
	(2) Entries made within six working days of notification of an emplo	oyee injury or illness	?	✓ Yes	□No	
	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No	
	(4) Retention according to policy?			✓ Yes	□No	
	(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No	
	(6) Previous calendar year log posted during February?		,	✓ Yes	□No	
	d. Are CHP 113s, Accident and Injury Report, compiled accurately?			✓ Yes	□No	
	(1) Commander review and sign?			✓ Yes	□No	
	(2) CHP 113s and attachments processed in a timely manner?			✓ Yes	□No	
•	e. Does the command utilize the CHP 113A, Safety Inspection Check	list?		✓ Yes	□No	
	(1) Are semiannual safety inspections conducted?			✓ Yes	□No	
	(2) Are safety hazards identified?	75		✓ Yes	□No	
	(3) Is corrective action taken within 30 days?			✓ Yes	□No	
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP a	and retained according	g to policy?	✓ Yes	□No	
f	f. Are unsafe conditions identified and documented on CHP 113B, Ha	zard Report/Inspection	on?	✓ Yes	□No	
	(1) Measures taken to correct situation within 30 days?			✓ Yes	□No	
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached	d to IIPP?		☐ Yes	☑ No	
g	g. Are the CHP 121 series thoroughly and accurately completed?			✓ Yes	□No	
	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No	
-	(2) Commander signature on appropriate forms?			✓ Yes	□No	

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

O	11 433141	(INEV. 3-00) OF 1 003				
_	(3)	Routed within time frames?			✓ Yes	□No
	h. Is (	CHP 208, Accident Prevention Report, thoroughly and	accurately completed?		✓ Yes	□No
	(1)		✓ Yes	□No		
	(2)	Commander review?			✓ Yes	□No
-	(3)	Commander signs appropriate form?			✓ Yes	□No
-	(4)	Properly routed within time limits?			✓ Yes	□No
	i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?					□No
	(1)	✓ Yes	□No			
	(2)	Safety recognition emblem summary current?			✓ Yes	□No
	j. Are	CHP 712As, Injury and Illness Prevention Program Or	ientation and Review, kep	t current?	✓ Yes	□No
	(1)	Is specific safety training documented on CHP 712, E	Employee Emergency Action	on Plan Review?	✓ Yes	□No
_	(2)	Copies maintained with IIPP file?			Yes	□No
6.	INJUR'	Y AND ILLNESS PREVENTION PROGRAM	04/01/09	ACTION REQUIRED	CORRECTED	)
	a. Cor	mmand specific IIPP on file?			√ Yes	□No
	(1)	Is the program effective?	2 1		✓ Yes	□No
	(2)	Contains all required documents?			✓ Yes	□No
	(3)	Discussed with all employees?			✓ Yes	□No
	(4)	All employees understand their roles and responsibili	ties?	8	✓ Yes	□No
	(5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?					□No
	(6)	New employees review and complete CHP 712A, Inju and Review?	ury and Illness Prevention	Program Orientation	✓ Yes	□No
	(7) Are unsafe hazards or conditions identified, investigated, corrected, and documented?					□No
	(8)	Is required documentation maintained according to po	olicy?		✓ Yes	□No
7.	COMM	UNICATION WITH DOSH	04/01/09	ACTION REQUIRED	CORRECTE	0
	a. Emp	oloyees aware of procedures regarding DOSH inspect	ions?		✓ Yes	□No
-	b. Con	nmand's documents readily available for review by DC	SH Compliance Officer?		✓ Yes	□No
8.	HAZAR	DOUS SUBSTANCE PROGRAM	04/01/09	ACTION REQUIRED	CORRECTED	D
í	a. Doe	s command have a written Hazardous Substance Pro	gram for substances used	within that command?	✓ Yes	□No
	(1)	Are hazardous substances identified and properly lab	eled?		✓ Yes	□No
	(2)	Warning signs posted?			✓ Yes	□No
	(3)	Material Safety Data Sheets readily available?			✓ Yes	□No
	(4)	Employees receive training?			✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(5)	) Training documented?				□No
(6)	(6) Employees informed of their right to applicable medical and exposure information?			✓ Yes	□No
9. HAZA	ARDOUS EXPOSURE CONTROL PROGRAMS	04/01/09	No No	CORRECTE	0
a. Ad	a. Activities identified within command that may require exposure to hazardous conditions?				
(1) Appropriate engineering and/or administrative controls implemented?					□No
(2)	(2) Protective equipment provided in accordance with bargaining unit agreements?				
(3)	(3) Employees trained on use and maintenance of equipment?			✓ Yes	□No
(4)	Training documented?			✓ Yes	□No

## COMMAND INSPECTION PROGRAM

	11401 FO		
<b>CYCEPTION</b>	IS DOCL	<b>JMENT</b>	

rage 1 of 2	r	ac	ie.	1	of	2
-------------	---	----	-----	---	----	---

Command: Division:		Chapter:	
Stockton Valley		12	
Inspected by:		Date:	
B. Languemi, Sgt. #11765		05/06/2009	

	Inspection docume	on number. Under "Forw ent shall be utilized to doc	ard to:" enter the ne ument innovative p	
TYPE OF INSPECTION		Total hours expended	on the	☐ Corrective Action Plan Included
☐ Division Level ☐ Command L	.evel	inspection: 2		Services
☐ Executive Office Level				Attachments Included
Follow-up Required:	Forwa	rd to:		
☐ Yes	Due D	ate:		
Chapter Inspection: Area Occ	upatio	onal Safety		
Inspector's Comments Regard				
The use of the CHP 113B is no hazard can be mitigated as soo		· · ·	d is reported t	o a supervisor immediately so the
mmand Suggestions for St	atewic	le Improvement:		
None.				
Inspector's Findings:				
Area is doing a good job with C	ocupa	ational Safety as ev	idenced by the	e injury record.
Commander's Response: ⊠0	Concu	r or 🗌 Do Not Con	cur (Do Not Cond	cur shall document basis for response)
Inspector's Comments: Shall a etc.)	ddress	non concurrence by co	mmander (e.g., f	indings revised, findings unchanged,

# COMMAND INSPECTION PROGRAM - KCEPTIONS DOCUMENT

i age 2 of 2

Command:	Division:	Chapter:
Stockton	Valley	12
Inspected by:		Date:
B. Languemi	, Sgt. #11765	05/06/2009

Required Action	
Corrective Action Plan/Timeline	
N/A.	

Employee would like to discuss this report with the reviewer. (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE  J. W. J.C.T., Por 3.G.Dim  INSPECTOR'S SIGNATURE	DATE 6-5-09 DATE 6-4-09
☐ Reviewer discussed this report with employee ☐ Do not concur	REVIEWER'S SIGNATURE	B/21/09

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Stockton	Valley	265
EVALUATED BY		DATE
B. Languemi, Sg	t. #11765	05/06/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluat	on 📝 Informal Evaluation	SUSPENSE DATE				
FOLLOW-UP REQUIRED  Yes No	☐ Correction Report	COMMANDER'S REVIEW		DATE		
1. GOALS AND A	COMPLISHMENTS	EVALUATED X	ACTION REQUIRED	CORRECTED	)	
	nd familiar with the Occupational Safety Pro I, Chapter 13?	ogram as outlined in HPM 10.6, 0	Occupational	✓ Yes	□No	
(1) Are goal	developed in accordance with department	tal policy?		√ Yes	□No	
(2) Are envi	2) Are environmental factors, exposure factors, and past experience/trends considered when setting goals?					
(3) Are illne	s and non-serious/non-traumatic injuries ex	xcluded from occupational safety	goals?	✓ Yes	□No	
(4) Are goal	appropriately categorized?			✓ Yes	□No	
(5) Are goal	realistic?			✓ Yes	□No	
(6) Are goal	consistent with departmental objectives?			✓ Yes	□No	
(7) Is input f	om all levels considered before goals are es	stablished?		✓ Yes	□No	
b. Are goals bei	g accomplished?			✓ Yes	□No	
(1) Accurate	reporting on CHP 113, Accident and Injury	Report?		✓ Yes	□No	
(2) Are accid	Are accidents increasing?				☑ No	
(3) Are injuri	s increasing?			☐ Yes	☑ No	
(4) Why are	(4) Why are they increasing/decreasing? Training (Briefing, CHP 100 forms, Training Days, 118's), Sergeant R				gs.	
(5) Is CHP 1	3, Accident and Injury Report, posted or re	eadily accessible?		✓ Yes	□No	
(6) Are empl	yees knowledgeable about goals and achie	evements?		✓ Yes	□No	
(7) Are emplo	yees providing suggestions toward goal att	tainment?		✓ Yes	□No	
2. PARTICIPATION		EVALUATED	ACTION REQUIRED	CORRECTED		
a. Commander a	ctively involved in program?			✓ Yes	□No	
(1) Command	er active in injury/illness case managemen	it?		✓ Yes	□No	
(2) What is th	e commander's attitude regarding occupation	onal safety? Active and visible	Occupational Safety P	rogram is e	ssential to	
maintaini	g the healthy welfare of employees. Lead	is by example.				

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

CHD	453M	/Day	5.061	ODI	000
	400IVI	inev.	2-UD1	UPI	uus

	(3	Occupational safety issues discussed at staff meetings and training days?	✓ Yes	□No
	(4	Are safety issues in the meeting minutes?	✓ Yes	□No
	(5	Commander comments regarding safety issues in performance evaluations?	☐ Yes	☑ No
	(€	Does the commander ensure use of appropriate safety equipment?	✓ Yes	□No
t	). A	re managers/supervisors actively involved in the program?	√ Yes	□No
	(1	) Are managers/supervisors involved in case management?	✓ Yes	□No
	(2	) Do they have the appropriate attitude?	✓ Yes	□No
	(3	) Are managers monitoring supervisors' progress and efforts to attain goals?	✓ Yes	□No
	(4	Are supervisors monitoring employees' efforts?	✓ Yes	□No
	(5	Do managers comment on safety issues in performance evaluations?	☐ Yes	☑ No
	(6	Do supervisors comment on safety issues in performance evaluations?	✓ Yes	□No
	(7	Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□No
C.	. Ar	e employees actively involved in the Occupational Safety Program?	✓ Yes	□ No
	(1)	Are employees involved in their case management?	✓ Yes	□No
	(2)	Are employees knowledgeable about safety goals?	✓ Yes	□No
	(3)	Are they aware of the command's achievements?	☐Yes	✓ No
	(4)	Are employees practicing safety while performing their duties?	✓ Yes	□No
	(5)	Are employees reporting unsafe conditions and/or work practices?	✓ Yes	□No
	(6)	Do employees work cooperatively to minimize hazards?	✓ Yes	☐ No
	(7)	Do employees offer suggestions to improve occupational safety?	✓ Yes	□No
	(8)	Is employee equipment properly used and maintained?	√ Yes	□No
3. A	CCIE	DENT AND INJURY TRENDS  EVALUATED  X  ACTION REQUIRED	CORRECTED	
a.	Со	mmander's method of identifying trends? Review 121's and CAL OSHA log; discuss with employees, superv	isors, and	nianagers.
	(1)	Are accidents and injuries being monitored to identify trends?	✓ Yes	□No
	(2)	Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 300, Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	✓ Yes	□No
	(3)	Are personnel in the command aware of current and potential trends?	✓ Yes	☐ No
b.	Wh	at corrective action has the command taken when a trend has been identified? Training (Bricfing, training d	ays, staff m	cetings.
	cou	nseling)		

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  Do Are roles and responsibilities defined in accordance with IIPP?	
Clerical (OAII), Communications (PSDII), Janitor. ASM.  (1) Is there representation from each collective bargaining unit?  (2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (7) Are roles and responsibilities defined in accordance with IIPP?	
(1) Is there representation from each collective bargaining unit?  (2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (7) Yes  (8) Are roles and responsibilities defined in accordance with IIPP?	cer,
(2) Management and supervisory representation?	
(2) Management and supervisory representation?	
(3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (7) Are roles and responsibilities defined in accordance with IIPP?	No
(4) Command Safety Coordinator active and effective?       ✓ Yes         (5) Are committee assignments rotated?       ✓ Yes         (6) COSC meetings held quarterly?       ✓ Yes         (7) Are meetings held more frequently when goals are not being attained?       ✓ Yes         (8) Do all committee members attend the meetings?       ✓ Yes         b. Are roles and responsibilities defined in accordance with IIPP?       ✓ Yes	No
(5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (8) Are roles and responsibilities defined in accordance with IIPP?  ✓ Yes	No
(6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  D. Are roles and responsibilities defined in accordance with IIPP?  ✓ Yes	No
(7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  b. Are roles and responsibilities defined in accordance with IIPP?	No
(8) Do all committee members attend the meetings?  b. Are roles and responsibilities defined in accordance with IIPP?  Yes	No
b. Are roles and responsibilities defined in accordance with IIPP?	No
	No
(1) Do committee members understand their roles and responsibilities?	No
	No
(2) Is an agenda prepared prior to the meeting?	No
(3) Are departmental and Division Occupational Safety meetings minutes readily available?	No
(4) Are these minutes utilized for Area meetings?	No
(5) Are assignments given during Area meetings?	No
c. Minutes prepared for the COSC meeting?	No
(1) Recording secretary appointed?	No
(2) Minutes posted on command's Occupational Safety Board?	No
(3) Are minutes included in IIPP file?	No
(4) Minutes maintained current year, plus three?	No
(5) Minutes forwarded through channels?	No
d. Is the COSC effective?	No
(1) Are COSC recommendations clear, concise and pertinent to the command?	No
(2) COSC proactive to eliminate potential causes of accidents and injuries?	No
(3) COSC disseminate current information and training regarding health and safety issues?	No
e. Do all personnel receive current information regarding health and safety?	No
f. Are outside agency safety programs utilized as a resource?	
g. Does the command maintain an effective health and safety communications system?	No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Potential hazards reported on CHP 113B, Hazard Report/	nspection?		☐ Yes	✓ No
(2) Are findings of the 113B, Hazard Report/Inspection, report	☐ Yes	☑ No		
(3) Do all members of the command participate in distribution of safety and health information?				☑ No
(4) COSC minutes posted in a timely manner?			✓ Yes	□No
(5) Required posters prominently displayed?			✓ Yes	□No
(6) COSC maintain the Command Occupational Safety Bulleti	n Board?		✓ Yes	□No
(7) Are responsibilities for the Occupational Safety Bulletin Bo	ard contents assigned to	specific members?	✓ Yes	□No
5. DOCUMENTATION	EVALUATED	ACTION REQUIRED	CORRECTED	)
a. STD 261s, Authorization to Use Privately Owned Vehicles on S filed in the employee's field folder?	State Business, complete	d annually and	✓ Yes	□No
<ul> <li>DMV INF 254, Government Agency Request for Driver License to request driver's license record check and filed in the employer</li> </ul>		ormation, utilized	☐ Yes	☑ No
c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?		-	✓ Yes	□No
(1) Are required injuries and illnesses logged?			✓ Yes	□No
(2) Entries made within six working days of notification of an e	mployee injury or illness?	)	✓ Yes	□No
(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No
(4) Retention according to policy?			✓ Yes	□No
(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No
(6) Previous calendar year log posted during February?			✓ Yes	□No
d. Are CHP 113s, Accident and Injury Report, compiled accurately	?		✓ Yes	□No
(1) Commander review and sign?			✓ Yes	□No
(2) CHP 113s and attachments processed in a timely manner?			✓ Yes	□No
e. Does the command utilize the CHP 113A, Safety Inspection Ch	ecklist?		✓ Yes	□No
(1) Are semiannual safety inspections conducted?			✓ Yes	□No
(2) Are safety hazards identified?			✓ Yes	□No
(3) Is corrective action taken within 30 days?			✓ Yes	□No
(4) CHP 113A, Safety Inspection Checklist, maintained with IIF	P and retained according	g to policy?	✓ Yes	□No
f. Are unsafe conditions identified and documented on CHP 113B,	Hazard Report/Inspection	n?	☐ Yes	☑ No
(1) Measures taken to correct situation within 30 days?			✓ Yes	□No
(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attack	ched to IIPP?		☐Yes	☑ No
g. Are the CHP 121 series thoroughly and accurately completed?			√ Yes	□No
(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
(2) Commander signature on appropriate forms?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

		_						
		(3)	Routed within time frames?				✓ Yes	□No
	h.	. Is	CHP 208, Accident Prevention Report, thoroughly and accur	ately completed?	1		✓ Yes	□No
-		(1)	(1) Supervisor comments in-depth, clear, and concise?					
		(2)	(2) Commander review?					
-		(3)	Commander signs appropriate form?	✓ Yes	□No			
		(4)	Properly routed within time limits?				✓ Yes	□No
	J.	Are	injuries and accidents documented on CHP 442, Individual A	Accident, Injury a	nd Safet	y Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	gnition Record, o	urrent?		✓ Yes	□ No
		(2)	Safety recognition emblem summary current?				✓ Yes	□No
	j.	j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?					✓ Yes	□ No
		(1)	Is specific safety training documented on CHP 712, Employ	ree Emergency A	ction Pla	n Review?	✓ Yes	□No
		(2) Copies maintained with IIPP file?					✓ Yes	□No
6	. IN	JUR	Y AND ILLNESS PREVENTION PROGRAM	EVALUATED		ACTION REQUIRED	CORRECTED	)
	a.	Cor	nmand specific IIPP on file?	1,			✓ Yes	□No
		(1) Is the program effective?					✓ Yes	□No
Î		(2) Contains all required documents?					✓ Yes	□No
		(3) Discussed with all employees?					✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?				✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Progran	n Orienta	tion and Review?	✓ Yes	□No
			New employees review and complete CHP 712A, Injury and and Review?	I Illness Preventi	on Progr	am Orientation	✓ Yes	□No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and doc	umented	?	✓ Yes	□No
		(8)	Is required documentation maintained according to policy?				√ Yes	□No
7.	СО	MMU	UNICATION WITH DOSH	EVALUATED		ACTION REQUIRED	CORRECTED	
	a.	Emp	loyees aware of procedures regarding DOSH inspections?				✓ Yes	□No
	b.	Com	mand's documents readily available for review by DOSH Co	mpliance Officer	?		Yes	□No
3.	HA	ZARI	DOUS SUBSTANCE PROGRAM	EVALUATED		ACTION REQUIRED	CORRECTED	
	а.	Does	s command have a written Hazardous Substance Program fo	or substances us	ed withir	that command?	✓ Yes	□No
	(	(1)	Are hazardous substances identified and properly labeled?				✓ Yes	□No
	(	(2) \	Warning signs posted?				✓ Yes	□No
	(	(3)	Material Safety Data Sheets readily available?				✓ Yes	□No
	(	(4) E	Employees receive training?				✓ Yes	□No

STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

### **OCCUPATIONAL SAFETY**

CHP 453M (Rev. 5-06) OPI 009

(5)	Training documented?			✓ Yes	□No
(6)	(6) Employees informed of their right to applicable medical and exposure information?		✓ Yes	□No	
9. HAZARI	DOUS EXPOSURE CONTROL PROGRAMS	EVALUATED	ACTION REQUIRED	CORRECTED	)
a. Activ	rities identified within command that may require exposure to	o hazardous cond	litions?	✓ Yes	□No
(1) A	Appropriate engineering and/or administrative controls imple	emented?		✓ Yes	□No
(2) F	Protective equipment provided in accordance with bargainin	g unit agreements	s?	✓ Yes	□No
(3) E	Employees trained on use and maintenance of equipment?			✓ Yes	□No
(4) T	Training documented?			✓ Yes	□No

#### 2. PARTICIPATION

c. (3): Employees are aware the Area has safety goals but do not know specific Area goals or achievements accomplished. This information will continue to be posted on the Occupational Safety Board and reinforced through training days, briefings, and staff meetings.

#### 4. AREA OCCUPATIONAL SAFETY COMMITTEE

g. (1) and (2): Potential hazards have not been reported through the use of a CHP 113B, Hazard Report/Inspection. Employees have verbally notified supervisors or AOSC members of such hazards. The hazards, and respective action, are subsequently recorded in the AOSC minutes. This method appears to work very well; therefore, the use of the CHP113B will not be mandated.

# COMMAND INSPECTION PROGRAM XCEPTIONS DOCUMENT

Command: S. Sacramento	Division: Valley	Chapter:	
Inspected by: Lieutenant L. Lopez		Date: 03/31/2009	

Page 1 of 2

rage 1012				
INSTRUCTIONS: This document shall number of the inspection in the Chapter shall be routed to and its due date. This improvement, identified deficiencies, co	· Inspecti s docume	on number. Under "Forw ent shall be utilized to do	vard to:" enter the nex	Il in the blanks as indicated. Enter the chapter at level of command where the document actices, suggestions for statewide a used if additional space is required.
TYPE OF INSPECTION  ☐ Division Level ☐ Command I ☐ Executive Office Level	_evel	Total hours expende inspection:	d on the	☐ Corrective Action Plan Included  ☐ Attachments Included
Follow-up Required:	Forwa	rd to: Valley Division		
⊠ Yes □ No	Due D	ate: 04/30/2009		
Chapter Inspection: 12		STATE OF STA		
	William Programs	i. D.		A STATE OF THE STA
Inspector's Comments Regar None.	aing ir	inovative Practices	j:	
Command Cuspostions for Ct	-1 ' '			
Command Suggestions for Stone.	atewid	e Improvement:		A STATE OF THE STA
.510.				
Inspector's Findings:				
	Safet	y Committee Bulle	tin Board not as	signed to a specific individual.
<ol><li>Safety Recognition Emb</li></ol>	lem A	ward Summary not	current.	
Commander's Response: 🛛	Concui	r or   Do Not Con	CUr (Do Not Concu	ur shall document basis for response)

inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

# COMMAND INSPECTION PROGRAM XCEPTIONS DOCUMENT

Page 2 of 2

Command:	Division:	Chapter:
S. Sacramento	Valley	12
Inspected by:		Date:
Lieutenant L. Lopez		03/31/2009

Required Action	
Corrective Action Plan/Timeline	

- 1. The Command Occupational Safety Committee Bulletin Board is assigned to the Occupational Safety Sergeant.
- 2. Safety Recognition Emblem Award Summary is updated on a quarterly basis prior to each Training Day for presentation by the commander.

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE	DATE 05/01/2009
	INSPECTOR'S SIGNATURE	DATE 05/01/2009
Reviewer discussed this report with	REVIEWER'S SIGNATURE	DATE/
employee	CA A	7/22/00
☐ Do not concur		11-10127

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

P 453M (Rev. 5-06) OPI 009

AREA DIVISION		NUMBER
South Sacramento	Valley	252
EVALUATED BY		DATE
L.M. Lopez, #10335		03/31/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluation  FOLLOW-UP REQUIRED  Yes No  BY  Correction Report  EVALUATED  03/24/2009  ACTION REQUIRED  N/A	DATE					
Yes No  BY  EVALUATED  ACTION REQUIRED	DATE					
1. GOALS AND ACCOMPLISHMENTS	03/31/20	DATE 03/31/2009				
03/2/12007 14/11	CORRECTE	D				
a. Is the command familiar with the Occupational Safety Program as outlined in HPM 10.6, Occupational Safety Manual, Chapter 13?	✓ Yes	□ No				
(1) Are goals developed in accordance with departmental policy?	✓ Yes	□No				
(2) Are environmental factors, exposure factors, and past experience/trends considered when setting go	als? 🗹 Yes	□No				
(3) Are illness and non-serious/non-traumatic injuries excluded from occupational safety goals?	☐ Yes	☑ No				
(4) Are goals appropriately categorized?	✓ Yes	□No				
(5) Are goals realistic?	✓ Yes	□No				
(6) Are goals consistent with departmental objectives?	✓ Yes	□No				
(7) Is input from all levels considered before goals are established?	✓ Yes	□No				
b. Are goals being accomplished?	✓ Yes	□No				
(1) Accurate reporting on CHP 113, Accident and Injury Report?	✓ Yes	□No				
(2) Are accidents increasing?	☐ Yes	☑ No				
(3) Are injuries increasing?	☐ Yes	☑ No				
(4) Why are they increasing/decreasing? The decrease is associated to continued training and follow-u	p.					
(5) Is CHP 113, Accident and Injury Report, posted or readily accessible?	✓ Yes	□No				
(6) Are employees knowledgeable about goals and achievements?	✓ Yes	□No				
(7) Are employees providing suggestions toward goal attainment?		□No				
2. PARTICIPATION         EVALUATED 03/24/2009         ACTION REQUIRED N/A	CORRECTED					
a. Commander actively involved in program?	☑ Yes	☐ No				
(1) Commander active in injury/illness case management?	✓ Yes	□No				
(2) What is the commander's attitude regarding occupational safety? The commander maintains a proact	tive approach wo	rking with				
management team, training officer, rank-and-file, and nonuniform members to prevent, discuss, and	management team, training officer, rank-and-file, and nonuniform members to prevent, discuss, and resolve occupational safety					
issues. The commander oversees all COSC meetings and personally speaks about occupational safety issues at training days.						

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

		(3) Occupational safety issues discussed at staff meetings and training days?					
		(4)	Are safety issues in the meeting minutes?			✓ Yes	□No
_		(5)	Commander comments regarding safety issues in performa	ince evaluations?		✓ Yes	□No
		(6)	Does the commander ensure use of appropriate safety equ	ipment?		✓ Yes	□No
	b.	Are	e managers/supervisors actively involved in the program?			✓ Yes	□No
		(1)	Are managers/supervisors involved in case management?			✓ Yes	□No
		(2)	Do they have the appropriate attitude?			✓ Yes	□ No
		(3) Are managers monitoring supervisors' progress and efforts to attain goals?					□ No
		(4) Are supervisors monitoring employees' efforts?					□No
		(5) Do managers comment on safety issues in performance evaluations?					□No
		(6) Do supervisors comment on safety issues in performance evaluations?					□No
		(7)	Do managers/supervisors ensure the use of proper safety e	quipment?		✓ Yes	□No
	C.	c. Are employees actively involved in the Occupational Safety Program?				✓ Yes	□No
		(1) Are employees involved in their case management?			✓ Yes	□No	
		(2) Are employees knowledgeable about safety goals?				✓ Yes	□No
	Ť	(3) Are they aware of the command's achievements?			✓ Yes	□No	
		(4) Are employees practicing safety while performing their duties?			✓ Yes	□No	
		(5) Are employees reporting unsafe conditions and/or work practices?			✓ Yes	□No	
		(6) Do employees work cooperatively to minimize hazards?			✓ Yes	□No	
		(7)	Do employees offer suggestions to improve occupational sa	fety?	,	✓ Yes	□No
		(8)	Is employee equipment properly used and maintained?			✓ Yes	□No
3.	AC	CID	ENT AND INJURY TRENDS	03/31/2009	ACTION REQUIRED	CORRECTED	
	a.	Con	nmander's method of identifying trends? The commander re	views occupational safet	y documentation and sta	atistics (inc	luding:
		DO	SC/DOSC minutes and DACC meeting minutes, etc.), overs	ees COSC meeting disc	ussions, receives feedba	ck from ur	iform and
		nonuniform members, and personally works with the Training Officer to address identified issues.					
		(1)	Are accidents and injuries being monitored to identify trends	?		✓ Yes	□No
		(2)	Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior mee	Accident and Injury Repo	rt, OSHA 300,	✓ Yes	□No
		(3)	Are personnel in the command aware of current and potentia	al trends?		✓ Yes	□No
	b.	Wha	t corrective action has the command taken when a trend has	s been identified? Most	recently, identified trend	ls have inc	luded
		inatt	ention while driving enforcement vehicles which have been a	ddressed in management	team meeting, training of	days, and th	rough
		supe	rvisory discussions in briefings. Counseling and documentat	ion has been instituted, a	s required.		
_							

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

a. What is the composition of the COSC? The commander is actively involved in all COSC meetings and personally ensures attendance.    Participation by licutenants, COSC sergeant, and representation from each uniform and nonuniform rank within the Area.		(1) Are commanders, managers, and supervisor	ors actively imple		tions?	✓ Yes	□No
participation by licutenants, COSC sergeant, and representation from each uniform and nonuniform rank within the Area.  (1) Is there representation from each collective bargaining unit?  (2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held quarterly?  (8) Do all committee members attend the meetings?  (9) Yes No  (1) Do committee members attend the meetings?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Are assignments given during Area meetings?  (7) Yes No  (8) Minutes prepared for the COSC meeting?  (8) In Recording secretary appointed?  (9) Minutes maintained current year, plus three?  (1) Minutes maintained current year, plus three?  (1) Yes No  (2) Minutes convarded through channels?  (3) Are minutes included in IIPP file?  (4) Minutes convarded through channels?  (5) Minutes convarded through channels?  (6) Minutes convarded through channels?  (7) Yes No  (8) No  (9) Are COSC effective?  (1) Are COSC disseminate current information and training regarding health and safety issues?  (9) Yes No	4.	4. COMMAND OCCUPATIONAL SAFETY COMMITT	EE (COSC)	1		CORRECTE	D
(1) Is there representation from each collective bargaining unit?  (2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held quarterly?  (8) Do all committee members attend the meetings?  (9) Yes		a. What is the composition of the COSC? The cor	nmander is activ	ely involved in all CO	SC meetings and persona	lly ensures a	attendance and
(2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held quarterly when goals are not being attained?  (8) Do all committee members attend the meetings?  (9) Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meetings?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) COSC meeting held quarterly?  (7) Are meetings held quarterly?  (8) Do all committee members attend the meetings?  (9) Yes   No  (10) Do committee members and responsibilities?  (11) Are these minutes utilized for Area meetings?  (12) Yes   No  (23) Are departmental and Division Occupational Safety meetings minutes readily available?  (3) Are these minutes utilized for Area meetings?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) Yes   No  (7) Are minutes prepared for the COSC meeting?  (8) No  (9) Minutes prepared for the COSC meeting?  (10) Are minutes included in IIPP file?  (11) Are cosc cormand's Occupational Safety Board?  (12) Yes   No  (13) Are minutes included in IIPP file?  (14) Minutes maintained current year, plus three?  (15) Minutes forwarded through channels?  (16) Are cosc recommendations clear, concise and pertinent to the command?  (17) Yes   No  (18) Cosc disseminate current information and training regarding health and safety issues?	_	participation by lieutenants, COSC sergeant, and	representation f	rom each uniform and	nonuniform rank within t	he Area.	
(2) Management and supervisory representation?  (3) Command Safety Coordinator assigned?  (4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held quarterly when goals are not being attained?  (8) Do all committee members attend the meetings?  (9) Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meetings?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (6) COSC Minutes prepared for the COSC meeting?  (7) Yes   No    (8) Do all committee members attend the meetings?  (9) Yes   No    (10) Are departmental and Division Occupational Safety meetings minutes readily available?  (11) Are these minutes utilized for Area meetings?  (12) Yes   No    (13) Are minutes of rithe COSC meeting?  (14) Minutes prepared for the COSC meeting?  (15) Are assignments given during Area meetings?  (16) Minutes prosereary appointed?  (17) Yes   No    (18) Minutes posted on command's Occupational Safety Board?  (19) Yes   No    (20) Minutes maintained current year, plus three?  (31) Are minutes included in IIPP file?  (42) Yes   No    (53) Minutes rowarded through channels?  (64) Minutes rowarded through channels?  (7) Yes   No    (85) Minutes forwarded through channels?  (87) Yes   No    (88) Do COSC proactive to eliminate potential causes of accidents and injuries?  (89) Post   No    (90) Post   No    (91) Post   No    (92) COSC proactive to eliminate potential causes of accidents and injuries?  (93) Post   No    (94) Post   No    (95) Post   No    (96) Post   No    (97) Post   No    (97) Post   No    (97) Post   No    (98) Post   No    (98) Post   No    (98) Post   No    (99) Post   No    (99) Post   No    (99) Post   No    (90) Post   No    (90) Post   No    (90) Post   No							
(3) Command Safety Coordinator assigned?		(1) Is there representation from each collective	bargaining unit?			✓ Yes	□ No
(4) Command Safety Coordinator active and effective?  (5) Are committee assignments rotated?  (6) COSC meetings held quarterly?  (7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (9) Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meetings?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (7) Yes   No  (8) Do all committee members understand their roles and responsibilities?  (9) Yes   No  (1) Do committee members understand their roles and responsibilities?  (9) Yes   No  (1) Are departmental and Division Occupational Safety meetings minutes readily available?  (9) Yes   No  (1) Are these minutes utilized for Area meetings?  (1) Yes   No  (2) Minutes prepared for the COSC meeting?  (2) Yes   No  (3) Are minutes included in IIPP file?  (4) Minutes posted on command's Occupational Safety Board?  (4) Minutes maintained current year, plus three?  (5) Minutes forwarded through channels?  (6) Minutes forwarded through channels?  (7) Yes   No  (8) Minutes forwarded through channels?  (9) Yes   No  (1) Are COSC effective?  (1) Are COSC recommendations clear, concise and pertinent to the command?  (2) COSC proactive to eliminate potential causes of accidents and injuries?  (2) Yes   No  (3) COSC disseminate current information and training regarding health and safety issues?	_	(2) Management and supervisory representatio	n?			✓ Yes	□No
(5) Are committee assignments rotated?	_	(3) Command Safety Coordinator assigned?				✓ Yes	☐ No
(6) COSC meetings held quarterly?		(4) Command Safety Coordinator active and eff	ective?			✓ Yes	□No
(7) Are meetings held more frequently when goals are not being attained?  (8) Do all committee members attend the meetings?  (7) Are roles and responsibilities defined in accordance with IIPP?  (8) Yes No  (9) Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (1) Yes No  (2) Is an agenda prepared prior to the meeting?  (2) Yes No  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (7) Yes No  (8) Do all committee members attend the meetings?  (8) Yes No  (9) Are departmental and Division Occupational Safety meetings minutes readily available?  (9) Yes No  (10) Are assignments given during Area meetings?  (11) Yes No  (12) Minutes prepared for the COSC meeting?  (12) Yes No  (23) Are minutes included in IIPP file?  (24) Minutes posted on command's Occupational Safety Board?  (25) Minutes forwarded through channels?  (26) Minutes forwarded through channels?  (27) Yes No  (37) Are COSC effective?  (38) Yes No  (49) Are COSC effective?  (40) Are COSC grecommendations clear, concise and pertinent to the command?  (40) Yes No  (50) COSC proactive to eliminate potential causes of accidents and injuries?  (9) Yes No  (10) COSC disseminate current information and training regarding health and safety issues?	_	(5) Are committee assignments rotated?				✓ Yes	□No
(8) Do all committee members attend the meetings?       Yes		(6) COSC meetings held quarterly?				Yes	□No
b. Are roles and responsibilities defined in accordance with IIPP?  (1) Do committee members understand their roles and responsibilities?  (2) Is an agenda prepared prior to the meeting?  (3) Are departmental and Division Occupational Safety meetings minutes readily available?  (4) Are these minutes utilized for Area meetings?  (5) Are assignments given during Area meetings?  (7) Yes No  (8) Minutes prepared for the COSC meeting?  (9) Yes No  (1) Recording secretary appointed?  (1) Minutes posted on command's Occupational Safety Board?  (3) Are minutes included in IIPP file?  (4) Minutes maintained current year, plus three?  (5) Minutes forwarded through channels?  (6) Minutes forwarded through channels?  (7) Yes No  (8) Is the COSC effective?  (9) Yes No  (10) Are COSC recommendations clear, concise and pertinent to the command?  (11) Yes No  (12) COSC proactive to eliminate potential causes of accidents and injuries?  (12) Yes No  (23) COSC disseminate current information and training regarding health and safety issues?	_	(7) Are meetings held more frequently when go	als are not being	attained?		✓ Yes	□No
(1)       Do committee members understand their roles and responsibilities?       Yes       No         (2)       Is an agenda prepared prior to the meeting?       Yes       No         (3)       Are departmental and Division Occupational Safety meetings minutes readily available?       Yes       No         (4)       Are these minutes utilized for Area meetings?       Yes       No         (5)       Are assignments given during Area meetings?       Yes       No         c.       Minutes prepared for the COSC meeting?       Yes       No         (1)       Recording secretary appointed?       Yes       No         (2)       Minutes posted on command's Occupational Safety Board?       Yes       No         (3)       Are minutes included in IIPP file?       Yes       No         (4)       Minutes maintained current year, plus three?       Yes       No         (5)       Minutes forwarded through channels?       Yes       No         (6)       Minutes forwarded through channels?       Yes       No		(8) Do all committee members attend the meeting	ngs?			✓ Yes	□No
(2) Is an agenda prepared prior to the meeting?		b. Are roles and responsibilities defined in accordar	nce with IIPP?			✓ Yes	□No
(3) Are departmental and Division Occupational Safety meetings minutes readily available?		(1) Do committee members understand their role	es and responsi	bilities?		✓ Yes	□No
(4) Are these minutes utilized for Area meetings? Yes No   (5) Are assignments given during Area meetings? Yes No   c. Minutes prepared for the COSC meeting? Yes No   (1) Recording secretary appointed? Yes No   (2) Minutes posted on command's Occupational Safety Board? Yes No   (3) Are minutes included in IIPP file? Yes No   (4) Minutes maintained current year, plus three? Yes No   (5) Minutes forwarded through channels? Yes No   d. Is the COSC effective? Yes No   (1) Are COSC recommendations clear, concise and pertinent to the command? Yes No   (2) COSC proactive to eliminate potential causes of accidents and injuries? Yes No   (3) COSC disseminate current information and training regarding health and safety issues? Yes No		(2) Is an agenda prepared prior to the meeting?				✓ Yes	□No
(5) Are assignments given during Area meetings?		(3) Are departmental and Division Occupational	Safety meetings	minutes readily availa	able?	✓ Yes	□No
c. Minutes prepared for the COSC meeting?  (1) Recording secretary appointed?  (2) Minutes posted on command's Occupational Safety Board?  (3) Are minutes included in IIPP file?  (4) Minutes maintained current year, plus three?  (5) Minutes forwarded through channels?  (6) Minutes forwarded through channels?  (7) Yes □ No  (8) Is the COSC effective?  (9) Yes □ No  (1) Are COSC recommendations clear, concise and pertinent to the command?  (1) Are COSC proactive to eliminate potential causes of accidents and injuries?  (3) COSC disseminate current information and training regarding health and safety issues?  (7) Yes □ No		(4) Are these minutes utilized for Area meetings	?			✓ Yes	□No
(1) Recording secretary appointed?		(5) Are assignments given during Area meetings	6?			✓ Yes	□No
(2) Minutes posted on command's Occupational Safety Board?		c. Minutes prepared for the COSC meeting?				✓ Yes	□No
(3) Are minutes included in IIPP file?		(1) Recording secretary appointed?				✓ Yes	□No
(4) Minutes maintained current year, plus three?		(2) Minutes posted on command's Occupational	Safety Board?			✓ Yes	□No
(5) Minutes forwarded through channels?		(3) Are minutes included in IIPP file?				✓ Yes	□No
d. Is the COSC effective?  (1) Are COSC recommendations clear, concise and pertinent to the command?  (2) COSC proactive to eliminate potential causes of accidents and injuries?  (3) COSC disseminate current information and training regarding health and safety issues?  □ Yes □ No		(4) Minutes maintained current year, plus three?				✓ Yes	□No
(1) Are COSC recommendations clear, concise and pertinent to the command?		(5) Minutes forwarded through channels?				✓ Yes	□No
(2) COSC proactive to eliminate potential causes of accidents and injuries?		d. Is the COSC effective?				✓ Yes	□No
(3) COSC disseminate current information and training regarding health and safety issues?		(1) Are COSC recommendations clear, concise a	and pertinent to t	the command?		✓ Yes	□No
		(2) COSC proactive to eliminate potential causes	of accidents an	d injuries?		✓ Yes	□No
e. Do all personnel receive current information regarding health and safety?		(3) COSC disseminate current information and tr	aining regarding	health and safety issu	ues?	✓ Yes	□No
<u> </u>	е	e. Do all personnel receive current information regar	ding health and	safety?		✓ Yes	□No
f. Are outside agency safety programs utilized as a resource?	f.	f. Are outside agency safety programs utilized as a re-	esource?			✓ Yes	□No
g. Does the command maintain an effective health and safety communications system?	g	g. Does the command maintain an effective health a	nd safety comm	unications system?		✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1) 'Potential hazards reported on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
_	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	✓ Yes	□No
	(3) Do all members of the command participate in distribution of safety and health information?	✓ Yes	□No
	(4) COSC minutes posted in a timely manner?	☑ Yes	□No
7	(5) Required posters prominently displayed?	✓ Yes	□No
	(6) COSC maintain the Command Occupational Safety Bulletin Board?	✓ Yes	□No
	(7) -Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific mem	bers?	☑ No
5.	DOCUMENTATION         EVALUATED 03/31/2009         ACTION REQUIR 05/01/2009		D
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?	d ☑ Yes	□No
	b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, utilize to request driver's license record check and filed in the employee's field folder?	zed ☑ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	✓ Yes	□No
	(1) Are required injuries and illnesses logged?	✓ Yes	□No
	(2) Entries made within six working days of notification of an employee injury or illness?	✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?	✓ Yes	□ No
	(4) Retention according to policy?	✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?		□No
	(6) Previous calendar year log posted during February?	✓ Yes	□No
	d. Are CHP 113s, Accident and Injury Report, compiled accurately?	✓ Yes	□No
	(1) Commander review and sign?	✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner?		□No
	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?	✓ Yes	□No
	(1) Are semiannual safety inspections conducted?	✓ Yes	□No
	(2) Are safety hazards identified?	✓ Yes	□No
	(3) Is corrective action taken within 30 days?	✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?	✓ Yes	□No
f	f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?	✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	☑ Yes	□No
g	g. Are the CHP 121 series thoroughly and accurately completed?	√ Yes	□No
	(1) Supervisory comments in-depth, clear, and concise?	✓ Yes	□No
	(2) Commander signature on appropriate forms?	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

		4001	M (Rev. 5-06) OPI 009				
		(3)	Routed within time frames?			✓ Yes	□No
	h.	ls	CHP 208, Accident Prevention Report, thoroughly and accura	ately completed?		✓ Yes	□No
_		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
		(2)	Commander review?		Vi	✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□ No
	i.	Are	injuries and accidents documented on CHP 442, Individual A	Accident, Injury and Safe	ty Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	gnition Record, current?		✓ Yes	□No
		(2)	Safety recognition emblem summary current?	☐Yes	☑ No		
	j.	Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, kept curr	rent?	✓ Yes	□No
		(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Action Pl	an Review?	✓ Yes	□No
		(2)	Copies maintained with IIPP file?			✓ Yes	□No
6	S. INJURY AND ILLNESS PREVENTION PROGRAM    EVALUATED   ACTION REQUIRED   N/A					CORRECTE	)
	a. Command specific IIPP on file?						□No
	(1) Is the program effective?						□No
		(2) Contains all required documents?					□No
		(3)	Discussed with all employees?			✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?			✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program Orient	ation and Review?	✓ Yes	□No
		(6)	New employees review and complete CHP 712A, Injury and and Review?	I Illness Prevention Prog	ram Orientation	✓ Yes	□No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and documented	d?	✓ Yes	□No
		(8)	Is required documentation maintained according to policy?	x	·	☑ Yes	□No
7.	со	MM	UNICATION WITH DOSH	03/31/2009	ACTION REQUIRED N/A	CORRECTED	
	a.	Em	ployees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b.	Con	nmand's documents readily available for review by DOSH Co	ompliance Officer?		✓ Yes	□No
В.	HAZARDOUS SUBSTANCE PROGRAM  EVALUATED  03/24/2009  ACTION REQUIRED  N/A					CORRECTED	
	a.	Does command have a written Hazardous Substance Program for substances used within that command?					□No
	(	(1)	Are hazardous substances identified and properly labeled?			✓ Yes	□No
	(	(2)	Warning signs posted?			✓ Yes	□No
	(	(3)	Material Safety Data Sheets readily available?			✓ Yes	□No
	(	(4)	Employees receive training?			✓ Yes	□No
_							

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

e de la companya de l	(5) ' Training documented?			✓ Yes	□No
	(6) Employees informed of their right to applicable medical	al and exposure information	on?	✓ Yes	□No
9. F	HAZARDOUS EXPOSURE CONTROL PROGRAMS	03/24/2009	ACTION REQUIRED N/A	CORRECTED	
а	. Activities identified within command that may require expo	osure to hazardous conditi	ions?	✓ Yes	☐ No
	(1) Appropriate engineering and/or administrative controls	s implemented?		✓ Yes	□No
	(2) Protective equipment provided in accordance with bar	rgaining unit agreements?		✓ Yes	□ No
	(3) Employees trained on use and maintenance of equipr	ment?		☑ Yes	□No
	(4) Training documented?			✓ Yes	□No

#### COMMAND INSPECTION PROGRAM CEPTIONS DOCUMENT

Command:	Division:	Chapter:	П
246	Valley	12	
Inspected by:		Date:	
Lt. T. Malone		03-18-09	

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans, and may be used to appeal findings. A CHP 51 Memorandum may be used if

additional space is required.						
TYPE OF INSPECTION		Corrective Action Plan Included				
☐ Division Level ☒ Command Level		Appeal Included				
Executive Office Level		☐ Attachments Included				
Follow-up Required: Forward to:		Commander's Signature:	Date: 03-18-09			
☐ Yes	Valley Division  Due Date: 04-15-09	y m/alone	02-16-09			
Chapter Inspection:						
Inspector's Comments Re	garding Innovative Pract	ices:				
Inspector's Comments Regarding Innovative Practices:  The South Lake Tahoe Area conducts Occupational Safety meetings quarterly on Area trainings days and includes all Area personnel as a members of the COSC. Time is used specifically to discuss occupational safety issues and items from the Division Occupational Safety meeting minutes. This athod is a more effective use of time and involves all personnel assigned to the Area. There is no						

ay in personnel receiving important occupation safety information and allows everyone to have a voice in relation to occupational safety.

Command	Suggestions	for Statewide	Improvement:	

None.

#### Inspector's Findings:

The Area's Occupational Safety Coordinator is Sergeant David Jenkins, ID 14776, and has been assigned to this position since April 2008. Sergeant Jenkins is actively involved in the Area's Occupational Safety program by updating the IIPP and completing the CHP 113 on a quarterly basis.

The South Lake Tahoe Area was overwhelmingly compliant in the majority of the categories identified on the Area Management Evaluation, Chapter 12, Occupational Safety. A COSC agenda is pre-determined for the quarterly Command Occupational Safety Committee meetings and Division Occupation Safety mutes are discussed in detail. Although one of the Area sergeants is assigned to take notes, the Area has not been as diligent as possible, formally converting the meeting notes into meeting minutes. posting the meeting minutes and routinely sending them to Division.

#### **COMMAND INSPECTION PROGRAM**

#### **FYCEPTIONS DOCUMENT**

. \_je 2

Command: 246	Division: Valley	Chapter:
Inspected by: Lt. T. Malone		Date: 03-18-09

The CHP 113B, *Hazard Report/Inspection*, is utilized for reporting hazards or potential hazards by Area personnel. The CHP 113A, *Safety Inspection Checklist*, is also utilized conducting quarterly inspections in the categories of parking lots, fire protection, housekeeping, safety bulletin board, building entriesexits, equipment, automotive service and personal protective equipment. The injury and illness prevention program orientation and review has been conducted and the CHP 712A completed on and annual basis.

Commander's Response:	
	8
Inspector's Comments:	

#### Required Action

Corrective Action Plan/Timeline

Command Occupational Safety Committee meeting minutes will be taken at the next COSC; the meeting minute notes will be formalized, posted on the Occupational Safety bulletin board, filed in the IIPP and sent to Valley Division.

#### **COMMAND INSPECTION PROGRAM**

### \*\*CEPTIONS DOCUMENT

age 3

Command: 246	Division: Valley	Chapter: 12
Inspected by:		Date:
Lt. T. Malon	е	03-18-09

Appeal Process: (Appeals shall be filed within five (5) business days of the	total about a linguistical
Appeal 1 100cos. (Appeals shall be filed within live (a) business days of the	e completed chapter inspection).
Commander's Basis for Appeal:	
outmands. 5 Easts (of ) Appeals	
).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Appeal Review/Decision: (This shall be the only level of appeal).	
Lead Inspector's Signature:	Date:
Lead Inspector's Signature:	Date: 03-18-09 Date:

STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL
AREA MANAGEMENT EVALUATIO

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
246	Valley	12
EVALUATED BY		DATE
Lt. T. Malone		03-18-09

RUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF E	VALUATION □ Informal Eva	luation	SUSPENSE DATE			
FOLLOW-U		prrection Report	COMMANDER'S REVIEW		DATE 03-18-09	
1. GOA	LS AND ACCOMPLISHMENTS		Yes	ACTION REQUIRED NO	CORRECTED N/A	
	the command familiar with the Occ afety Manual, Chapter 13?	cupational Safety Program a	as outlined in HPM 10.6, C	Occupational	✓ Yes	□No
(1	) Are goals developed in accordar	nce with departmental policy	/?		✓ Yes	□No
(2	) Are environmental factors, expos	sure factors, and past expe	rience/trends considered v	when setting goals?	✓ Yes	□No
(3	(3) Are illness and non-serious/non-traumatic injuries excluded from occupational safety goals?			✓ Yes	□No	
(4	(4) Are goals appropriately categorized?				✓ Yes	□ No
(5) Are goals realistic?				✓ Yes	□No	
(6	Are goals consistent with departe	nental objectives?			✓ Yes	□No
— <del>(</del> 7	ls input from all levels considered	d before goals are establish	ed?		✓ Yes	□No
b. Are goals being accomplished?					✓ Yes	□No
(1)	(1) Accurate reporting on CHP 113, Accident and Injury Report?				☑ Yes	☐ No
(2)	Are accidents increasing?				☐Yes	✓ No
(3)	Are injuries increasing?				☐ Yes	☑ No
(4)	Why are they increasing/decreas	ing? Accidents and injurie	s have not increased beca	use we routinely discus	s occupation	onal safety
	in Area briefings and Area meet	ings to heighten awareness				
			1889-3			
(5)	Is CHP 113, Accident and Injury	Report, posted or readily ac	ccessible?		✓ Yes	□No
(6)	Are employees knowledgeable a	bout goals and achievemer	its?		✓ Yes	□No
(7)	Are employees providing sugges	tions toward goal attainmer	it?		✓ Yes	□No
2. PART	CIPATION		icavere renderance	A CONTRACTOR CONTRACTOR CONTRACTOR	corrected N/A	
a. Co	mmander actively involved in prog	am?			✓ Yes	□No
(1)	Commander active in injury/illnes	s case management?			✓ Yes	□No
(2)	What is the commander's attitude	regarding occupational sa	fety? Occupational Safet	y is extremely importan	t to decrea	se injuries.
	illnesses and associated costs.					

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

Occupational safety issues discussed at staff meetings and Are safety issues in the meeting minutes?	training days?		✓ Yes	□No
Are safety issues in the meeting minutes?				
the entry leader in the mouning minutes.			✓ Yes	□No
Commander comments regarding safety issues in performa	ince evaluations?	,	✓ Yes	□No
Does the commander ensure use of appropriate safety equi	ipment?		✓ Yes	□No
managers/supervisors actively involved in the program?			✓ Yes	□No
Are managers/supervisors involved in case management?			✓ Yes	□No
Do they have the appropriate attitude?			✓ Yes	□No
Are managers monitoring supervisors' progress and efforts	to attain goals?		✓ Yes	□No
Are supervisors monitoring employees' efforts?			✓ Yes	□No
Do managers comment on safety issues in performance eva	aluations?		✓ Yes	□No
Do supervisors comment on safety issues in performance en	valuations?		✓ Yes	□No
Do managers/supervisors ensure the use of proper safety en	quipment?		✓ Yes	□No
employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
Are employees involved in their case management?			✓ Yes	□No
Are employees knowledgeable about safety goals?			✓ Yes	□No
Are they aware of the command's achievements?			✓ Yes	□No
Are employees practicing safety while performing their duties	s?		✓ Yes	□No
Are employees reporting unsafe conditions and/or work prac	ctices?		✓ Yes	□No
Do employees work cooperatively to minimize hazards?			✓ Yes	□No
Do employees offer suggestions to improve occupational safe	fety?		✓ Yes	□No
Is employee equipment properly used and maintained?			✓ Yes	□No
ENT AND INJURY TRENDS	EVALUATED Yes	ACTION REQUIRED		)
nmander's method of identifying trends? The commander rev	711.75	100000		and
pment damage as well as exposures as soon as they happen.	1111	11112		
Are accidents and injuries being monitored to identify trends?	?		✓ Yes	□ No
		y Report, OSHA 300,		□No
Are personnel in the command aware of current and potentia	al trends?		✓ Yes	□No
corrective action has the command taken when a trend has	been identified?	No specific trends have be	en identified.	
	Does the commander ensure use of appropriate safety equinanagers/supervisors actively involved in the program?  Are managers/supervisors involved in case management?  Do they have the appropriate attitude?  Are managers monitoring supervisors' progress and efforts.  Are supervisors monitoring employees' efforts?  Do managers comment on safety issues in performance evance of proper safety explored in the Occupational Safety Program and Injuries and Illnesses, entries, prior mee Are personnel in the command aware of current and potential Program and Program and Illnesses, entries, prior mee	Does the commander ensure use of appropriate safety equipment?  managers/supervisors actively involved in the program?  Are managers/supervisors involved in case management?  Do they have the appropriate attitude?  Are managers monitoring supervisors' progress and efforts to attain goals?  Are supervisors monitoring employees' efforts?  Do managers comment on safety issues in performance evaluations?  Do supervisors comment on safety issues in performance evaluations?  Do managers/supervisors ensure the use of proper safety equipment?  employees actively involved in the Occupational Safety Program?  Are employees involved in their case management?  Are employees knowledgeable about safety goals?  Are they aware of the command's achievements?  Are employees practicing safety while performing their duties?  Are employees work cooperatively to minimize hazards?  Do employees work cooperatively to minimize hazards?  Do employees offer suggestions to improve occupational safety?  Is employee equipment properly used and maintained?  EVALUATED Yes  Thand Injury TRENDS  PARE AND INJURY TRENDS  The commander reviews the 113 and pment damage as well as exposures as soon as they happen.  Are accidents and injuries being monitored to identify trends?  Is the Occupational Safety Committee reviewing CHP 113, Accident and Injuricy of Occupational Injuries and Illnesses, entries, prior meeting minutes?  Are personnel in the command aware of current and potential trends?	Does the commander ensure use of appropriate safety equipment?  Imanagers/supervisors actively involved in the program?  Are managers/supervisors involved in case management?  Do they have the appropriate attitude?  Are managers monitoring supervisors' progress and efforts to attain goals?  Are supervisors monitoring employees' efforts?  Do managers comment on safety issues in performance evaluations?  Do supervisors comment on safety issues in performance evaluations?  Do managers/supervisors ensure the use of proper safety equipment?  employees actively involved in the Occupational Safety Program?  Are employees involved in their case management?  Are employees knowledgeable about safety goals?  Are they aware of the command's achievements?  Are employees practicing safety while performing their duties?  Are employees reporting unsafe conditions and/or work practices?  Do employees work cooperatively to minimize hazards?  Do employees equipment properly used and maintained?  ENT AND INJURY TRENDS  EVALUATED Yes  No  MacTION REQUIRED No  PACTION REQUIRED No  ACTION REQUIRED No  ACTION REQUIRED ACTION REQUIRED No  APPRIED ACTION REQUIRED ACTION REQUIRED ACTION REQUIRED No  APPRIED ACTION REQUIRED ACTION REQUIRED No  ACTION REQUIRED ACTION REQUIRED No  APPRIED ACTION REQUIRED ACTION REQUIRED No  ACTION REQUIRED NO	Does the commander ensure use of appropriate safety equipment?    Yes   managers/supervisors actively involved in the program?   Yes

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

#### **AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY**

	(1) Are commanders, managers, and supervisors actively implementing corrective actions?					
4.	CON	IMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	Yes	Yes	Yes	)
- 6	a. V	What is the composition of the COSC? The commander condu	cts COSC meeting	gs during Area training days	and all the pers	sonnel
	a	ssigned to the Area are Occupational Safety Committee memb	ers.			
	(1	) Is there representation from each collective bargaining unit	?		✓ Yes	□No
-	(2	Management and supervisory representation?			✓ Yes	□No
2010010	(3	Command Safety Coordinator assigned?			✓ Yes	□No
	(4	) Command Safety Coordinator active and effective?			✓ Yes	☐ No
	(5	) Are committee assignments rotated?			☐ Yes	☑ No
	(6	) COSC meetings held quarterly?		100	✓ Yes	□ No
	(7	) Are meetings held more frequently when goals are not beir	ng attained?		✓ Yes	□No
	(8	) Do all committee members attend the meetings?			✓ Yes	□ No
b	. A	re roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
	(1	) Do committee members understand their roles and respons	sibilities?		✓ Yes	□No
	(2	Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3)	Are departmental and Division Occupational Safety meeting	gs minutes readily	available?	✓ Yes	□No
	(4)	Are these minutes utilized for Area meetings?			✓ Yes	□No
	(5)	Are assignments given during Area meetings?			✓ Yes	□No
С	Mi	nutes prepared for the COSC meeting?			✓ Yes	□No
	(1)	Recording secretary appointed?			✓ Yes	□No
	(2)	Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
	(3)	Are minutes included in IIPP file?			✓ Yes	□No
	(4)	Minutes maintained current year, plus three?			☐ Yes	☑ No
	(5)	Minutes forwarded through channels?			☐ Yes	☑ No
d.	ls <sup>-</sup>	the COSC effective?			✓ Yes	□No
	(1)	Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□No
	(2)	COSC proactive to eliminate potential causes of accidents a	and injuries?		✓ Yes	□No
	(3)	COSC disseminate current information and training regarding	ng health and safe	ty issues?	✓ Yes	□No
е.	Do	all personnel receive current information regarding health an	d safety?		✓ Yes	□ No
	Are	outside agency safety programs utilized as a resource?			☐Yes	☑ No
g.	Do	es the command maintain an effective health and safety com	munications syste	m?	✓ Yes	□No

#### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

011	TIT 435M (Nev. 3-00) OF 1009				
	(1) Potential hazards reported on CHP 113B, Hazard Report/Insp	ection?		✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report dis	seminated according to	policy?	✓ Yes	□No
	(3) Do all members of the command participate in distribution of s	safety and health inform	nation?	✓ Yes	□No
	(4) COSC minutes posted in a timely manner?	The second of th			□No
	(5) Required posters prominently displayed?	Required posters prominently displayed?			
	(6) COSC maintain the Command Occupational Safety Bulletin Bo	SC maintain the Command Occupational Safety Bulletin Board?			□No
	(7) Are responsibilities for the Occupational Safety Bulletin Board	sponsibilities for the Occupational Safety Bulletin Board contents assigned to specific members?			□No
5.	DOCUMENTATION	EVALUATED Yes	ACTION REQUIRED Yes	CORRECTED N/A	)
	STD 261s, Authorization to Use Privately Owned Vehicles on State filed in the employee's field folder?			✓ Yes	□No
	b. DMV INF 254, Government Agency Request for Driver License/Ide to request driver's license record check and filed in the employee's		rmation, utilized	✓ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No
	(1) Are required injuries and illnesses logged?	100031		✓ Yes	□No
	(2) Entries made within six working days of notification of an empl	oyee injury or illness?		✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No
= 0	(4) Retention according to policy?			✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6) Previous calendar year log posted during February?			✓ Yes	□No
c	d. Are CHP 113s, Accident and Injury Report, compiled accurately?	5,515,52		✓ Yes	□No
	(1) Commander review and sign?			✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner?			✓ Yes	□No
e	e. Does the command utilize the CHP 113A, Safety Inspection Check	list?		✓ Yes	□No
	(1) Are semiannual safety inspections conducted?			✓ Yes	□No
	(2) Are safety hazards identified?			✓ Yes	□No
	(3) Is corrective action taken within 30 days?			✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP a	and retained according	to policy?	✓ Yes	□No
f.	f. Are unsafe conditions identified and documented on CHP 113B, Ha	zard Report/Inspection	?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?			✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached	d to IIPP?		✓ Yes	□No
ď	Are the CHP 121 series thoroughly and accurately completed?			✓ Yes	□ No
	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□ No
	(2) Commander signature on appropriate forms?			✓ Yes	□ No

#### AREA MANAGEMENT EVALUATION

#### **OCCUPATIONAL SAFETY**

	(4) Properly routed within time limits?			✓ Yes	☐ No
	i. Are injuries and accidents documented on CHP 442, Individual A	Accident, Injury an	d Safety Recognition Record?	✓ Yes	□No
	(1) Are CHP 442s, Individual Accident, Injury and Safety Reco	Yes	□No		
	(2) Safety recognition emblem summary current?			✓ Yes	□No
	j. Are CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, k	ept current?	✓ Yes	□No
	(1) Is specific safety training documented on CHP 712, Employ	ee Emergency A	ction Plan Review?	✓ Yes	□No
	(2) Copies maintained with IIPP file?			✓ Yes	□No
6	6. INJURY AND ILLNESS PREVENTION PROGRAM	N/A	di .		
	a. Command specific IIPP on file?				□No
	(1) Is the program effective?			✓ Yes	□No
	(2) Contains all required documents?			✓ Yes	□No
	(3) Discussed with all employees?			✓ Yes	□No
_	(4) All employees understand their roles and responsibilities?			✓ Yes	□No
_	(5) Each employee completed CHP 712A, Injury and Illness Pro	evention Program	Orientation and Review?	✓ Yes	□No
	(6) New employees review and complete CHP 712A, Injury and and Review?	d Illness Preventio	n Program Orientation	✓ Yes	□No
	(7) Are unsafe hazards or conditions identified, investigated, co	orrected, and docu	mented?	✓ Yes	□No
	(8) Is required documentation maintained according to policy?			✓ Yes	□No
7.	COMMUNICATION WITH DOSH	Yes	ACTION REQUIRED No	CORRECTED N/A	
	a. Employees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b. Command's documents readily available for review by DOSH Co	ompliance Officer	?	✓ Yes	□No
8.	. HAZARDOUS SUBSTANCE PROGRAM	Yes	No REQUIRED	N/A	
	a. Does command have a written Hazardous Substance Program for	or substances use	ed within that command?	✓ Yes	□No
	(1) Are hazardous substances identified and properly labeled?			✓ Yes	□No
	(2) Warning signs posted?			✓ Yes	□No
	(3) Material Safety Data Sheets readily available?			✓ Yes	□No
	(4) Employees receive training?			✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(5	i) Training documented?			✓ Yes	□No
(6	) Employees informed of their right to applicable medic	al and exposure informa	tion?		□No
. HAZ	ARDOUS EXPOSURE CONTROL PROGRAMS	Yes	ACTION REQUIRED No	N/A	Di
a. Activities identified within command that may require exposure to hazardous conditions?					□ No
(1	) Appropriate engineering and/or administrative control	s implemented?		✓ Yes	□No
(2	) Protective equipment provided in accordance with bar	rgaining unit agreements	s?	✓ Yes	□No
(3	) Employees trained on use and maintenance of equipr	nent?		✓ Yes	□No
(4	) Training documented?			✓ Yes	□No

Department of California Highway Patrol AREA MANAGEMENT EVALUATION Charters 12	246 Area	Division	Numbe		
Chapter 12 OCCUPATIONAL SAFETY	Evaluated By	T. MALON	Date	7-18-09	
INSTRUCTIONS: Indicate items reviewed by plate and an action Required box. If this form is used as be initialed and dated as deficiencies are correasswers, or fill in the blanks as indicated. If a can be placed in the Summary Statement. The findings, accomplishments or corrective action evaluator's overall impressions. This form car can be handwritten if desired.	s a Correction Rep acted. Answer in additional commen a Summary State as, unresolved ite	ort, the "Correcti dividual items with its are necessary, ment should inclu ms, problems or p	on" box sin "yes" or the informate signification and significations, a	hould "no" nation cant ind the	
Type of Evaluation					
☐ Formal Evaluation ☐ Informal Evaluation	Suspense Date _				
Follow-up Required Correction Report					
☐ Yes ☐ No by	Commender's Rev	iew	Date		
1. GOALS AND ACCOMPLISHMENTS	Evaluated	Action Required	Correcte	d	
a. Is the command familiar with the Occupational Safet in HPM 10.6, Chapter 13?	y Program as outlined		yes Yes	□ No	
(1) Are goals developed in accordance with departm	antal policy?		₩ Yes	□ No	
(2) Are environmental factors, exposure factors, and trends considered when setting goals?			⊠ Yes	□ No	
(3) Are illnesses and non-serious/non-traumatic injuri- occupational safety goals?	es excluded from		₩ Yes	□ No	
(4) Are goals appropriately categorized?			OB Yes	□ No	
(5) Are goals realistic?			Ø Yes	N₀	12/
(6) Are goals consistent with departmental objective			₩ Yes	_ <u> </u>	
(7) is imput from all levels considered before goals a	re established?		© Yes	O No	
b. Are goals being accomplished?			☐ Yes	No	
(1) Accurate reporting on CHP 113?			⊕ Yes	□ N <sub>0</sub>	
(2) Are accidents increasing?			☐ Yes	DS No	
(3) Are injuries increasing?		A	☐ Yes	₩o.	
(4) Why are they increasing/decreasing?	.,,			CALLEC	
CETDENTS AND INJURIES	HAYE NO	INCREAS	No DO	M TO LA	-76
E DESCUSS OCC. SAFETY IN L	SRIEFINGS,	AND ALEA I	Jee II		WAR
(5) Is CHP 113 posted or readily accessible?			Yes Yes	□ No	
(6) Are employees knowledgeable about goals and a			₩ Yes	□ No	
	attainment?		Yes	□ No	

AREA MANAGEMENT EVALUATION Chapter 12 OCCUPATIONAL SAFETY

Z. PARTICIPATION	Evaluated	Action Required	Corrected			
a. Commander actively involved in program	1?		₩ Yes	O N		
(1) Communder active in injury/illness	case management?		✓ Yes	□ N		
(2) What is the commander's attitude	regarding occupational sa	MY? OCC. SAFET	Y IS E	TRE		
EMPURIANT TO DECRE	DIE INCIDE	TS AND CON	v			
(3) Occupational safety issues discuss	ed at staff meetings and	training days?	(3 Yes			
[4] Are safety issues in the meeting m	iertes?		Yes	D N		
(5) Commander comments regarding sa	fety issues in performance	e evaluations?	⊠ Yes	□ N		
(6) Does the commander ensure use of	appropriate safety equip	ment?	Yes			
b. Are managers/supervisors actively involv	red in the program?		₩ Yas	אם		
(1) Are manageral supervisors involved	n case management?		₫ Yes			
(2) Do they have the eppropriate attitu	ide?		<b></b> Yes	□ N		
(3) Are managers monitoring supervisor	The second of th					
(4) Are supervisors monitoring employe	UZ Yes	□N				
(5) Do managers comment on safety is	E Yes	□ N				
(6) Do supervisors comment on safety	issues in performance evi	duntions?	₩ Yes	□ N		
(7) Do managers/supervisors ensure the	use of proper safety equ	ipment?	Yes Yes	D N		
c. Are employees actively involved in the (	Occupational Safety Progr	ım?	EYes	□ N		
(1) Are employees involved in their cas	e management? THE	IR OWN	Yes Yes			
(2) Are employees knowledgeable about			Ø Yes	□ N		
(3) Are they aware of the command's	ochievaments?		Œ Yes			
(4) Are employees practicing safety wh	ile performing their duties	7 .	Yes Yes	□ M		
(5) Are amployees reporting unsafe con	ditions and/or work pract	ets?	☐ Yes	CT N		
(6) Do employees work cooperatively to	minimize hazards?		₩ Yes	C N		
(7) Do employees offer suggestions to	mprove occupational safe	iy?	☑ Yes	□ N		
(8) is employees' equipment properly us	ed and maintained?		Ø Yes	O No		
ACCIDENT AND INJURY TRENDS	Evaluated	Action Required	Corrected			
a. Commander's method of identifying trend						
THE COMMANDER A	EYIEWSTA	E 113 AND	IS MA	DE		

WARE OF ALL INS	TURTES, A	ACCIDENTS, A	IND FOR	IPME
AMAGE AS WELL AS				t
(1) Are accidents and injuries being monito			E Yes	□ No
(2) Is the Occupational Safety Committee	reviewing CHP 113,	)	/	
OSHA 200 Log entries, prior meeting minute	es?		Yes Yes	□ No
[3] Are personnel in the command aware of			Yes .	□ No
b. What corrective action has the command to		Carrier and Carrie	SPECIF	zc_
TRENDS HAVE BEEN	I DENT	FIED.	· · · · · · · · · · · · · · · · · · ·	
(1) Is commander, the managers, supervisor corrective actions?	rs, actively implement	TONS HAYE B	EEN [] YH	CE No
COMMAND OCCUPATIONAL SAFETY	Evaluated	Action Required	Corrected	
MMITTEE (COSC)  a. What is the composition of the COSC?		MAND HAS	Cose	mos
(1) Le there representation from each collec	ctive bargaining unit?		Ty Yes	□ No
(1) Is there representation from each collect (2) Management and supervisory represents	THE PARTY OF THE P		Yes	□ No
	ation?			
(2) Management and supervisory represents	ation?		Ø Yes	□ No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned?	ation? d affactive?	YEES ARE MEN	Ø Yes Ø Yes Ø Yes	□ No
(2) Management and supervisory represents (3) Command Safety Coordinator active and (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly?	d effective?  AUENPLO	7	Ø Yes Ø Yes Ø Yes	□ No □ No □ No
(2) Management and supervisory represents (3) Command Safety Coordinator active and (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly?	d effective?  AUENPLO	7	Ø Yes Ø Yes Ø Yes	No No No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated?	d offective?  ALL EMPLO  no goals are not being	7	Ø Yes Ø Yes Ø Yes Ø Yes Ø Yes	No No No No No
(2) Management and supervisory represents (3) Command Safety Coordinator active and (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held guarterly? (7) Are meetings held more frequently when	d effective?  AULEMPLO  m yeals are not being meetings?	7	Ø Yes Ø Yes Ø Yes Ø Yes Ø Yes Ø Yes	No No No No No No No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held guarterly? (7) Are meetings held more frequently when (8) Do all Committee members attend the r	d effective?  AULEMPLO  m gasls are not being mostings?  produces with BPP?	attained? THEN HAU  ATT OCCU	Yes	No No No No No No No No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly? (7) Are meetings held more frequently when (8) Do all Committee members attend the right. (8) Are roles and responsibilities defined in accounts.	d effective?  ALL Emplo  m yeals are not being meetings?  ardance with BPP?	attained? THEN HAU  ATT OCCU	Yes Yes Yes Yes  Yes  Yes  Yes  Yes  Ye	No
(2) Management and supervisory represents (3) Command Safety Coordinator active and (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held guarterly? (7) Are meetings held more frequently whe (8) Do all Committee members attend the r b. Are roles and responsibilities defined in account.	d effective?  ALL EMPLO  m yeals are not being meetings?  ordance with BPP?  ie roles and responsibi-	attained? THE HAU attained? NHT OCCU	Yes	No   No   No   No   No   No   No   No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held guarterly? (7) Are meetings held more frequently when (8) Do all Committee members attend the r b. Are roles and responsibilities defined in account) (1) Do Committee members understand their (2) Is an agenda prepared prior to the meeting (3) Are departmental and Division Occupation	d effective?  AULEMPLO  m goals are not being meetings?  ordance with BPP?  ir roles and responsibiliting?  onal Safety meeting m	attained? THE HAU attained? NHT OCCU	Yes	No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly? (7) Are meetings held more frequently when (8) Do all Committee members attend the ri b. Are roles and responsibilities defined in account) (1) Do Committee members understand their (2) Is an agenda prepared prior to the meeting available?	d effective?  ALL EMPLO  m goals are not being meetings?  ordance with BPP?  ir roles and responsibiliting?  ordal Safety meeting n  stings?	attained? THE HAU attained? NHT OCCU	Yes	No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly? (7) Are meetings held more frequently whe (8) Do all Committee members attend the real of the coordinate of the coordina	d effective?  ALL EMPLO  m goals are not being meetings?  ordance with BPP?  ir roles and responsibiliting?  ordal Safety meeting n  stings?	attained? THE HAU attained? NHT OCCU	Yes	No   No   No   No   No   No   No   No
(2) Management and supervisory represents (3) Command Safety Coordinator assigned? (4) Command Safety Coordinator active and (5) Are Committee assignments rotated? (6) COSC meetings held quarterly? (7) Are meetings held more frequently when (8) Do all Committee members attend the rib. Are roles and responsibilities defined in account (1) Do Committee members understand their (2) Is an agenda prepared prior to the meeting. (3) Are departmental and Division Occupation and Are these minutes utilized for Area meeting. (4) Are these minutes utilized for Area meeting.	d effective?  ALL EMPLO  m goals are not being meetings?  ordance with BPP?  ir roles and responsibiliting?  ordal Safety meeting n  stings?	attained? THE HAU attained? NHT OCCU	Yes	No   No   No   No   No   No   No   No

(3) Are minutes included in IIPP file?	JOME OF	C.THEM	☐ Yes	Œ
(4) Minutes maintained current year, ph			☐ Yes	9
(5) Minutes forwarded through channels			☐ Yes	-12
d. Is the COSC effective?			₩ Yes	_
(1) Are COSC recommendations clear, c	oncise and pertinent to t	he command?	Yes	0
(2) COSC proactive to aliminate potenti			Yes	0
(3) COSC disseminate current information and safety issues?	on and training regarding	health	Yes	0
e. Do all personnel receive current informat	ion regarding health and	safety?	☐ Yes	
1. Are outside agency safety programs utili	red as a resource?		☐ Yas	•
g. Does the command maintain an effective	health and safety comm	unications system?	(S) Yes	
(1) Potential bazards reported on CHP 1	1138?		☐ Yes	6
(2) Are findings of the 1138 report diss	seminated according to p	olicy? -	☐ Yes	0
(3) Do all members of the command parend health information?	rticipate in distribution of	salety	Yes	С
(4) COSC minutes posted in a timely m	anner?		☐ Yes	œ
(5) Required posters prominently display	ed?		☐ Yes	
(6) COSC maintain the Command Occup	ational Safaty Bulletin B	pard?	☐ Yes	C
(7) Are responsibilities for the Occupation assigned to specific members?	onal Safety Bulletin Box		Yes	_
DOCUMENTATION	Evaluated	Action Required		
DOGGALES INTO			Corrected	
a. STD 261s completed annually and filed i			Corrected Yas	
	n employee's field folder	?		
a. STD 261s completed annually and filed in b. DMV INF 254 utilized to request driver's	n employee's field folder	?	Yas	С
a. STD 261s completed annually and filed in b. DMV INF 254 utilized to request driver's in the employee's field folder?	in employee's field folder license record check and	?	Yes Yes	5
STD 261s completed annually and filed i     DMV INF 254 utilized to request driver's in the employee's field folder?     OSHA 200 Log utilized?	n employee's field folder ficense record check and good?	? I filed	Yas Yas	
a. STD 261s completed annually and filed in b. DMV INF 254 utilized to request driver's in the employee's field folder? c. DSHA 200 Log utilized? (1) Are required injuries and illnesses log (2) Entries made within six working day	n employee's field folder license record check and aged? s of notification of an er	? I filed	Yas Yas	0.10
a. STD 261s completed annually and filed in b. DMV INF 254 utilized to request driver's in the employee's field folder?  c. OSHA 200 Log utilized?  (1) Are required injuries and illnesses log (2) Entries made within six working day injury or illness?	n employee's field folder license record check and aged? s of notification of an er	? I filed	Yes Yes	
a. STD 261s completed annually and filed i b. DMV INF 254 utilized to request driver's in the employee's field folder?  c. OSHA 200 Log utilized?  (1) Are required injuries and illnesses to (2) Entries made within six working day injury or illness?  (3) Is lost-time and limited-duty document	n employee's field folder ficense record check and aged? s of notification of an en attain accurate?	? I filed	Yes Yes Yes	
STD 261s completed annually and filed i     DMV INF 254 utilized to request driver's     in the employee's field folder?     DSHA 200 Log utilized?     (1) Are required injuries and illnesses log     (2) Entries made within six working day injury or illness?     (3) Is lost-time and limited-duty document     (4) Retention according to policy?	n employee's field folder ficense record check and aged? s of notification of an en ntation accurate?	? I filed	Yes Yes Yes Yes Yes Yes	
2. STD 261s completed annually and filed in b. DMV INF 254 utilized to request driver's in the employee's field folder?  C. OSHA 200 Log utilized?  (1) Are required injuries and illnesses log  (2) Entries made within six working day injury or illness?  (3) Is lost-time and limited-duty document  (4) Retention according to policy?  (5) Readily accessible for review by Callery  (6) Readily accessible for review by Callery  (7) The statement of t	n employee's field folder ficense record check and aged? s of notification of an en ntation accurate?	? I filed	Yes Yes Yes Yes Yes Yes Yes	

	(2) CHP 113s and attachments processed in timely manner?	E Yes	□ No
0.	Does the command utilize the CHP 113A?	CY Yes	□ No
	[1] Are semi-annual safety inspections conducted?	Yes	□ No
	[2] Are safety hazards identified?	Yes	
	(3) Is corrective action taken within 30 days? IF CONTS ALLOW!	19 Yes	□ N
	(4) CHP 113A maintained with RPP and retained according to policy?	Yes	
t.	Are unsafe conditions identified and documented on CHP 1138?	E Yes	
	(1) Measures taken to correct situation within 30 days? IF LOWS ALLOW!	Yes	
	(2) Capy of CHP 113B filed or ettached to liPP?	₩ Yas	O N
Q.	Are the CHP 121 series forms thoroughly and accurately completed?	Ø Y≥≤	□ N
	(1) Supervisory comments in-depth, clear and concise?	12 Yes	□ N
37	[2] Commander signature on appropriate forms?	Yes Yes	
	(3) Routed within time frames?	€ Yes	
ħ.	is CHP 208 form thoroughly and accurately completed?	Yes	
_	(1) Supervisor comments in-depth, clear and concise?	⊠ Yes	(C) N
	(2) Commander review?	E Yes	

CHP 453M (Rev 1-96)

(3) Commander signs appropriate form?

(4) Properly routed within time limits?

i. Are injuries and accidents documented on CHP 442?

(1) Are CHP 442s current?			☐ Yes	□ No
(2) Safety recognition emblem summary	current?		Ø Yes	□ No
i. Are CHP 712As kept current?			☑ Y <sub>9</sub> s	□ No
(1) Is specific safety training documents	ed on CHP 712?		☑ Yes	□ No
(2) Copies maintained with IIPP file?			<b>™</b> Yes	□ No
8. INJURY AND ILLNESS PREVENTION PROGRAM	Evaluated	Action Required	Corrected	
a. Command specific IIPP on file?			₩ Yas	□ No
(1) Is the program effective?			₩ Yes	□ No
(2) Contains all required documents?			Œ Yes	□ No
(3) Discussed with all employees?			☑ Yes	□ No
(4) All employees understand their roles	and responsibilities?		☑ Yes	□ No
(5) Each employee completed CHP 712/			₩ Yas	□ No

Yas

Yes

☑ Yas

□ No

□ No

☐ No

(6) New employees review and complete	CHP 712A7		Ø Yes	□ No
(7) Are unsafe hazards or conditions ide		rected and documented?	Yes	□ No
(8) Is required documentation maintained			Yes	□ No
7. COMMUNICATION WITH DOSH	Evaluated	Action Required	Corrected	
a. Employees aware of procedures regarding	DOSH inspections?		Ø Yes	□ No
b. Command's documents readily evaluable for	or review by DOSH Com	pliance Officer?	☑ Yas	□ No
. HAZARDOUS SUBSTANCE PROGRAM	Evaluated	Action Required	Corrected	
a. Does command have a written Hazardous used within that command?	Substance Program for	substances	Ø Yes	□ N <sub>0</sub>
(1) Are hazardous substances identified :	and property labeled?		- W Yes	□ No
(2) Warning signs posted?	and brokert) monitor:		E Yes	□ No
(3) Material Safety Date Sheets readily	availahla?		™ Yes	□ No
(4) Employees receive training?			TY Yes	□ No
(5) Training documented?			☐ Yes	□ No
(6) Employees informed of their right to information?	applicable medical and o	exposure	Yes	□ No
. HAZARDOUS EXPOSURE CONTROL ROGRAMS	Evaluated	Action Required	Corrected	
a. Activities identified within command that hezardous conditions?	may require exposure to		WY. EYES	□ No
(1) Appropriate engineering end/or admini	strative controls implem	ented?	<b>☑</b> Y94	□ No
(2) Protective equipment provided in acco	ordance with bergaining	unit agreements?	Yes	□ No
(3) Employees trained on use and mainter	nance of equipment?	0.00	EZ Yes	□ No .
(4) Training documented?			Ø Yes	□ No
				Page 6

# COMMAND INSPECTION PROGRAM SXCEPTIONS DOCUMENT

rage	1	of	3
------	---	----	---

Command:	Division:	Chapter:
San Andreas	Valley	12
Inspected by:	"0040	Date: 03/10/2009
Officer C. Pars	ons #9310	03/10/2009

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans. A CHP 51 Memorandum may be used if additional space is required. TYPE OF INSPECTION Total hours expended on the Corrective Action Plan Included inspection: ☐ Division Level ☐ Command Level Executive Office Level 8 Forward to: Follow-up Required: Due Date: 04/15/2009 ☐ Yes ⊠ No Chapter Inspection: Inspector's Comments Regarding Innovative Practices: Policy is followed per HPM 10.6, Occupational Safety Manual. All uniformed and non-uniformed personnel are members of the San Andreas Area Command Occupational Safety Committee. Command Suggestions for Statewide Improvement: None. Inspector's Findings: The Area is very committed to occupational safety, policy is understood and followed by all, and there are no discernable deficiencies in procedures. Commander's Response: 
Concur or Do Not Concur (Do Not Concur shall document basis for response)

South Story I'm

Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

# COMMAND INSPECTION PROGRAM SXCEPTIONS DOCUMENT

dage 2 of 3

Command: San Andreas	Division: Valley	Chapter:
Inspected by: Officer C. Pars	ons #9310	Date: 03/10/2009

# **COMMAND INSPECTION PROGRAM**"XCEPTIONS DOCUMENT

age 3 of 3

Command:	Division:	Chapter:
San Andreas	Valley	12
Inspected by: Officer C. Pars	ons #9310	Date: 03/10/2009

<u>.</u>			
Required Action	A MEN WHAT IN THE WAY		
Corrective Action Plan/Timelin	)		

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE	S/13/09
	Mails Edward forsms	DATE / 13/09
Reviewer discussed this report with employee Concur Do not concur	REVIEWER'S SIGNATURE	7/21/09

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

P 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
255	Valley	255-09-001
EVALUATED BY		DATE
C. Parsons #9310	)	03-10-2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

YPE OF EVALUATION  ☑ Formal Evaluation  ☐ Informal Evaluation	SUSPENSE DATE			
Correction Report  ☐ Yes ☑ No  BY	COMMANDER'S REVIEW		DATE 3/	10/0
. GOALS AND ACCOMPLISHMENTS	EVALUATED Yes	No	CORRECTE	
<ul> <li>Is the command familiar with the Occupational Safety Pr Safety Manual, Chapter 13?</li> </ul>	ogram as outlined in HPM 10	0.6, Occupational	√ Yes	□No
(1) Are goals developed in accordance with department	al policy?		✓ Yes	□No
(2) Are environmental factors, exposure factors, and pa	st experience/trends conside	ered when setting goals?	✓ Yes	□No
(3) Are illness and non-serious/non-traumatic injuries ex	cluded from occupational sa	ifety goals?	✓ Yes	□No
(4) Are goals appropriately categorized?			✓ Yes	□No
(5) Are goals realistic?	(8C		✓ Yes	□No
(6) Are goals consistent with departmental objectives?			✓ Yes	□No
(7) Is input from all levels considered before goals are e	stablished?		✓ Yes	□No
b. Are goals being accomplished?			√ Yes	□No
(1) Accurate reporting on CHP 113, Accident and Injury	Report?		✓ Yes	□No
(2) Are accidents increasing?			☐ Yes	☑ No
(3) Are injuries increasing?			☐ Yes	☑ No
(4) Why are they increasing/decreasing? Refer to narr	ative.			
(5) Is CHP 113, Accident and Injury Report, posted or re			✓ Yes	□ No
(6) Are employees knowledgeable about goals and achi			✓ Yes	□ No
(7) Are employees providing suggestions toward goal at	tainment?	ACTION REQUIRED	✓ Yes	□No
PARTICIPATION	Yes	No No	CORRECTE	
a. Commander actively involved in program?	*		✓ Yes	□No
(1) Commander active in injury/illness case managemen	t?		✓ Yes	□No
(2) What is the commander's attitude regarding occupati	onal safety? Refer to narra	ntive.		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

(	3) Occupational safety issues discussed at staff meetings and training days?	✓ Yes	□No
(	4) Are safety issues in the meeting minutes?	✓ Yes	□No
(	5) Commander comments regarding safety issues in performance evaluations?	✓ Yes	⊡ No
(	6) Does the commander ensure use of appropriate safety equipment?	✓ Yes	□No
b. <i>A</i>	Are managers/supervisors actively involved in the program?	✓ Yes	□No
(	Are managers/supervisors involved in case management?	✓ Yes	□No
(:	2) Do they have the appropriate attitude?	✓ Yes	□No
(;	3) Are managers monitoring supervisors' progress and efforts to attain goals?		□No
(4	4) Are supervisors monitoring employees' efforts?	✓ Yes	□No
( !	5) Do managers comment on safety issues in performance evaluations?	✓ Yes	□No
(6	6) Do supervisors comment on safety issues in performance evaluations?	✓ Yes	□No
(7	7) Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□No
c. A	re employees actively involved in the Occupational Safety Program?	✓ Yes	□No
(1	Are employees involved in their case management?	✓ Yes	□No
(2	2) Are employees knowledgeable about safety goals?	✓ Yes	□No
(3	<ul><li>(3) Are they aware of the command's achievements?</li><li>(4) Are employees practicing safety while performing their duties?</li><li>(5) Are employees reporting unsafe conditions and/or work practices?</li></ul>		
(4			
(5			
(6	Do employees work cooperatively to minimize hazards?	✓ Yes	□No
(7	Do employees offer suggestions to improve occupational safety?	✓ Yes	□No
(8	) Is employee equipment properly used and maintained?	✓ Yes	□No
ACCI	DENT AND INJURY TRENDS  EVALUATED Yes  ACTION REQUIRED NO	CORRECTED	)
a. C			-
a. C	ommander's method of identifying trends? Refer to narrative.		
(1)	Are accidents and injuries being monitored to identify trends?	✓ Yes	□No
(2)	Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 300, Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	✓ Yes	□No
(3)	Are personnel in the command aware of current and potential trends?	✓ Yes	□No
	hat corrective action has the command taken when a trend has been identified? Refer to narrative.		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(1)	Are commanders, managers, and supervisors actively impl	ementing correctiv	ve actions?	✓ Yes	□ No
4. (	OMN	MAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	Yes	NO REQUIRED	CORRECTED	
а	. Wi	hat is the composition of the COSC? Refer to narrative.	TO SOUN	1770		
						****
	(1)	Is there representation from each collective bargaining unit	?		✓ Yes	□No
	(2)	Management and supervisory representation?			✓ Yes	□No
	(3)	Command Safety Coordinator assigned?	W	2	✓ Yes	□No
	(4)	Command Safety Coordinator active and effective?			✓ Yes	□No
	(5)	Are committee assignments rotated?				□No
	(6)	COSC meetings held quarterly?				□No
	(7)	Are meetings held more frequently when goals are not bein	g attained?		✓ Yes	□No
	(8)	Do all committee members attend the meetings?			✓ Yes	□No
b.	Are	e roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
	(1)	Do committee members understand their roles and respons	sibilities?		✓ Yes	□No
	(2)	Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3)	Are departmental and Division Occupational Safety meeting	gs minutes readily	available?	✓ Yes	□No
	(4)	Are these minutes utilized for Area meetings?			✓ Yes	□No
	(5)	Are assignments given during Area meetings?			✓ Yes	□No
c.	Min	utes prepared for the COSC meeting?			✓ Yes	□No
	(1)	Recording secretary appointed?			✓ Yes	□No
	(2)	Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
	(3)	Are minutes included in IIPP file?			✓ Yes	□No
	(4)	Minutes maintained current year, plus three?				□No
	(5)	Minutes forwarded through channels?			✓ Yes	□No
d.	Is th	ne COSC effective?			✓ Yes	□No
	(1)	Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□No
	(2)	COSC proactive to eliminate potential causes of accidents a	and injuries?		✓ Yes	□No
	(3)	COSC disseminate current information and training regarding	ng health and safe	ty issues?	✓ Yes	□No
e.	Do a	all personnel receive current information regarding health an	d safety?		✓ Yes	□No
f.	Are c	outside agency safety programs utilized as a resource?			✓ Yes	□No
g.	Doe	s the command maintain an effective health and safety com	munications syste	m?	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	✓ Yes	□ No
	(3) Do all members of the command participate in distribution of safety and health information?		□No
	(4) COSC minutes posted in a timely manner?	✓ Yes	□No
	(5) Required posters prominently displayed?	√ Yes	□No
	(6) COSC maintain the Command Occupational Safety Bulletin Board?	✓ Yes	☐ No
	(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific m	embers?	☐ No
5.	DOCUMENTATION EVALUATED ACTION RE NO	QUIRED CORRECTE	D
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually filed in the employee's field folder?	and ☑ Yes	□No
	b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, to request driver's license record check and filed in the employee's field folder?	utilized ☑ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	✓ Yes	□No
	(1) Are required injuries and illnesses logged?	✓ Yes	□No
	(2) Entries made within six working days of notification of an employee injury or illness?	√ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?		□No
	(4) Retention according to policy?	✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?	Yes	□No
	(6) Previous calendar year log posted during February?	✓ Yes	□No
ď	d. Are CHP 113s, Accident and Injury Report, compiled accurately?	✓ Yes	□No
	(1) Commander review and sign?		□No
	(2) CHP 113s and attachments processed in a timely manner?	√ Yes	□No
e	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?	✓ Yes	□No
	(1) Are semiannual safety inspections conducted?	✓ Yes	□No
	(2) Are safety hazards identified?	✓ Yes	□No
	(3) Is corrective action taken within 30 days?	✓ Yes	□ No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy	?	□No
f.	f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?	✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	✓ Yes	☐ No
g	g. Are the CHP 121 series thoroughly and accurately completed?	✓ Yes	□No
	(1) Supervisory comments in-depth, clear, and concise?	✓ Yes	□No
	(2) Commander signature on appropriate forms?	✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

	-						
1		(3)	Routed within time frames?			✓ Yes	□No
	h.	ls (	CHP 208, Accident Prevention Report, thoroughly and accura	ately completed?		✓ Yes	□No
		(1) Supervisor comments in-depth, clear, and concise?				✓ Yes	□No
		(2)	Commander review?			✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
_		(4)	Properly routed within time limits?			✓ Yes	□No
	j.	Are	injuries and accidents documented on CHP 442, Individual A	Accident, Injury and	Safety Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	gnition Record, cur	rent?	✓ Yes	□No
		(2)	Safety recognition emblem summary current?			✓ Yes	□No
	j.	Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, ke	ot current?	✓ Yes	□ No
		(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Act	ion Plan Review?	✓ Yes	□No
		(2)	Copies maintained with IIPP file?			✓ Yes	□No
6.	IN.	JUR	Y AND ILLNESS PREVENTION PROGRAM	EVALUATED Yes	ACTION REQUIRED	CORRECTED	
	a.	Cor	nmand specific IIPP on file?			✓ Yes	□No
		(1)	Is the program effective?			✓ Yes	□No
		(2)	Contains all required documents?			√ Yes	□No
		(3)	Discussed with all employees?	120-11-12		✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?			✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pro	evention Program (	Orientation and Review?	✓ Yes	□No
			New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention	Program Orientation	✓ Yes	□No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and docur	nented?	✓ Yes	□No
		(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	co	MMU	UNICATION WITH DOSH	Yes Yes	ACTION REQUIRED NO	CORRECTED	)
	a.	Emp	ployees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b.	Com	nmand's documents readily available for review by DOSH Co	ompliance Officer?		√ Yes	□No
8.	HA	ZAR	DOUS SUBSTANCE PROGRAM	Yes	ACTION REQUIRED	CORRECTED	
	a.	Does	s command have a written Hazardous Substance Program f	or substances used	d within that command?	✓ Yes	□No
		(1)	Are hazardous substances identified and properly labeled?			✓ Yes	□No
		(2)	Warning signs posted?			✓ Yes	□No
	(	(3)	Material Safety Data Sheets readily available?		WALANTO MARKALINI, MILITANI	✓ Yes	□No
	(	(4)	Employees receive training?			✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

P 453M (Rev. 5-06) OPI 009

(5)	) Training documented?			✓ Yes	□No
(6)	6) Employees informed of their right to applicable medical and exposure information?		✓ Yes	□No	
. HAZA	ARDOUS EXPOSURE CONTROL PROGRAMS	Yes Yes	ACTION REQUIRED No	CORRECTE	D
a. Ac	ctivities identified within command that may require exp	osure to hazardous cond	itions?	✓ Yes	□No
(1)	(1) Appropriate engineering and/or administrative controls implemented?				□No
(2)	Protective equipment provided in accordance with ba	rgaining unit agreements	1?	✓ Yes	□No
(3)	Employees trained on use and maintenance of equip	ment?		✓ Yes	□No
(4)	Training documented?			✓ Yes	□No

Refer to attached narrative,

## Area Management Evaluation – Occupational Safety Chapter 12

#### 1. GOALS AND ACCOMPLISHMENTS

**B.** (4) Currently, there are too few recordable accidents or disabling injuries to identify a true trend indicating an increase in the statistics. There are no identifiable indicators that reveal Area personnel are not remaining cognizant of the Area goals and maintaining a high level of awareness to insure accidents and injuries are prevented.

#### 2. Participation

**A.(2)** The Area Commander endears the area personnel with a positive and supportive environment to promote a unified effort to insure the Area personnel work to maintain occupational safety and awareness in addition to meeting annual goals. The Area Commander is committed to departmental occupational safety goals and programs.

#### 3. ACCIDENT AND INJURY TRENDS

- **A.** The Area Commander monitors and reviews all reported injuries and accidents. The Commander communicates with Area supervisors to determine if any trends are occurring within the area that are not identifiable thru statistical analysis. The Commander reviews all related documentation, logs, and reports, including; CHP 270, CHP 121, CHP 121D, CHP 113, OSHA 300 log, and any written or verbal employee comments or suggestions that will assist in identifying trends or patterns.
- **B.** Based on a review of current and past area documentation including CHP 270's, CHP 121's, CHP 121D's, the CHP 113 and OSHA 300 log, there is not an identifiable trend indicating an increase in accidents or injuries.

#### 4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)

**A.** The Area Commander is the Chairman of the COSC. A sergeant is assigned as the Area Coordinator of the COSC. All uniformed personnel assigned to the Area are members of the COSC. All non-uniformed personnel assigned to the Area are members of the COSC.

# COMMAND INSPECTION PROGRAM \*\*XCEPTIONS DOCUMENT

Command:	Division:	Chapter:
214 - Sacramento CC	201 - Valley	12
Inspected by:	Date:	
Segeant R. Obregon, 96	03/12/2009	

Page 1 of 2

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans. A CHP 51 Memorandum may be used if additional space is required.							
TYPE OF INSPECTION  ☐ Division Level ☐ Command Level ☐ Executive Office Level		Total hours expended on the inspection:	☐ Corrective Action Plan Included ☐ Attachments Included				
Follow-up Required: ☐ Yes   ☑ No		rd to: Division ate: 03/31/2009					
Chapter Inspection: Chapter	12 - 0	Occupational Safety					
Inspector's Comments Regard	ding Ir	novative Practices:	を通り 2000 point Private e 11 metal/Charleton (電流)				
None.							
Command Suggestions for St	atewic	e Improvement:					
None.							
Inspector's Findings:							
n response to a Comm-Net Message dated January 9, 2009, Sacramento Communications Center conducted a Division selected inspection of their occupational safety program to ensure compliance with departmental policy. No discrepancies were noted.  The following documents were completed as part of this inspection:  Exceptions Document							
<ul> <li>Occupational Safety Insp</li> </ul>	pection	n Checklist					
Commander's Response:	Concu	r or 🗌 Do Not Concur (Do Not Conc	ur shall document basis for response)				
None.							
Inspector's Comments: Shall a etc.)	ddress	non concurrence by commander (e.g., fir	ndings revised, findings unchanged,				
J/A							

Sandana and a c

## **COMMAND INSPECTION PROGRAM**

<b>EXCEPTIONS DOCUMENT</b>	
0.00	

rage 2 of 2

Command: 214 - Sacramento CC	Division:	Chapter:
Inspected by:	201 - Valley	Date:
Segeant R. Obregon, 90	652/PSDSI T. Howell, A8811	03/12/2009

Service Address (Service Service Service )	· 121 《装装车】 新华山人 《烧器》 建胶 500 × 100 种种的经验证
Required Action	
A STATE OF THE PROPERTY OF THE	· · · · · · · · · · · · · · · · · · ·
Corrective Action Plan/Timeline	
Corrective Action Flan, Filmeline	

N/A

Employee would like to discuss this report with	COMMANDER'S SIGNATURE	DATE
the reviewer.	A New Den	03/17/2009
(See HPM 9.1, Chapter 8 for appeal procedures.)	Hypra NTION	03/17/2009
	MNSPECTOR'S SIGNATURE	DATE
	There Thewell	3/17/09
Reviewer discussed this report with	REVIEWER'S SIGNATURE	DATE /
employee	-/1 (1)	6. 102/11
Concur Do not concur	and the same	1

#### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
214 - SCC	Valley	
EVALUATED BY		DATE
R. R. Obregon, 9	652 / T. Howell, A08811	03/12/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

1.	YPE OF EV	ALUATION    SUSPENSE DATE   SUSPENSE DATE		
F	OLLOW-UP	No Correction Report	DATE DATE	3.17.0
1	. GOAL	S AND ACCOMPLISHMENTS	REQUIRED CORRE	CTED
	a. Is Sa	the command familiar with the Occupational Safety Program as outlined in HPM 10.6, Occupa Ifety Manual, Chapter 13?	tional	es 🗌 No
	(1)	Are goals developed in accordance with departmental policy?	✓ Ye	s 🗌 No
	(2)	Are environmental factors, exposure factors, and past experience/trends considered when s	etting goals?	es 🗌 No
	(3)	Are illness and non-serious/non-traumatic injuries excluded from occupational safety goals?	<b></b> ✓ Ye	es 🗌 No
	(4)	Are goals appropriately categorized?	√ Ye	es 🗌 No
	(5)	Are goals realistic?	✓ Ye	es 🗌 No
	(6)	Are goals consistent with departmental objectives?	√ Ye	es 🗌 No
	(7)	Is input from all levels considered before goals are established?	<b></b> ✓ Ye	s 🗌 No
	b. Are	goals being accomplished?	✓ Ye	s 🗌 No
	(1)	Accurate reporting on CHP 113, Accident and Injury Report?	√ Ye	s 🗌 No
	(2)	Are accidents increasing?	☐ Ye	s 📝 No
	(3)	Are injuries increasing?	☐ Ye	s 🗸 No
	(4)	Why are they increasing/decreasing? All SCC employees review and are briefed with Occur	patronal Safety inform	ation on a
		regular basis via strift briefings and training days. Upon review of the most recent (last 5 ye	ears) Occupational Sale	ety statistics,
		Sacramento Communications Center (SCC) has met or exceeded occupational goals each ye	ear	
	(5)	Is CHP 113, Accident and Injury Report, posted or readily accessible?	☑ Ye	s 🗌 No
	(6)	Are employees knowledgeable about goals and achievements?	√ Ye	s 🗌 No
	(7)	Are employees providing suggestions toward goal attainment?	✓ Ye	s 🗌 No
2.	PARTIC	CIPATION SVELOUED SCHOOL R	SERVED CORRECT	NAME OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER OWNE
	a. Con	nmander actively involved in program?	☑ Yes	s 🗌 No
	(1)	Commander active in injury/illness case management?	✓ Yes	s 🗌 No
	(2)	What is the commander's attitude regarding occupational safety? The Commander expects t	hat the various units we	ncking in the
		SCC facility shall be represented at the Quarterly Occupational Safety Meetings. The Com-	mander ensures all dep.	ntmental issue-
		and information be provided to employees through unit representation and via the quarterly	meetings and shift beis	fings
-				

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(3)	Occupational safety issues discussed at staff meetings and t	raining days?		√ Yes	□No
	(4)	Are safety issues in the meeting minutes?			√ Yes	□No
	(5)	Commander comments regarding safety issues in performan	ce evaluations?		✓ Yes	□No
	(6)	Does the commander ensure use of appropriate safety equip	ment?		✓ Yes	□No
	b. Are	managers/supervisors actively involved in the program?			✓ Yes	□No
	(1)	Are managers/supervisors involved in case management?			✓ Yes	□No
	(2)	Do they have the appropriate attitude?			✓ Yes	□No
	(3)	Are managers monitoring supervisors' progress and efforts to	attain goals?		✓ Yes	□No
	(4)	Are supervisors monitoring employees' efforts?			✓ Yes	□No
	(5)	Do managers comment on safety issues in performance eval	uations?		✓ Yes	□No
	(6)	Do supervisors comment on safety issues in performance eva	aluations?		✓ Yes	□No
	(7)	Do managers/supervisors ensure the use of proper safety eq	uipment?		✓ Yes	□No
	c. Are	employees actively involved in the Occupational Safety Progr	am?		✓ Yes	□No
	(1)	Are employees involved in their case management?			✓ Yes	□No
	(2)	Are employees knowledgeable about safety goals?			√ Yes	□No
1	(3)	Are they aware of the command's achievements?			✓ Yes	□No
	(4)	Are employees practicing safety while performing their duties	?		√ Yes	□No
	(5)	Are employees reporting unsafe conditions and/or work practi	ces?		Yes	□No
	(6)	Do employees work cooperatively to minimize hazards?			✓ Yes	□No
	(7)	Do employees offer suggestions to improve occupational safe	ty?		✓ Yes	□No
	(8)	s employee equipment properly used and maintained?			Yes	□No
3.	ACCIDE	NT AND INJURY TRENDS	EVALUATED	ACTION REQUIRED	CORRECTED	
	a. Com	mander's method of identifying trends? The Commander and	Occupational Safety C	ommittee discuss the st	atus of inj	ury/illnēss
	case	in the facility in general terms. Job related duties, including	g repetitive type body n	overnents, and condition	ons of shar	ed and CHIF
	spec	tic work areas are discussed and considered prior to posting	shift briefings and/or tr	aining that would addre	ss these is	sues. There
	disc	ssion); occur on an as needed and quarterly basis.				
	(1)	are accidents and injuries being monitored to identify trends?			Yes	□No
	(2) I	s the Occupational Safety Committee reviewing CHP 113, Ac og of Occupational Injuries and Illnesses, entries, prior meeti	cident and Injury Repor ng minutes?	t, OSHA 300,	☑ Yes	□No
	(3) A	re personnel in the command aware of current and potential	trends?		√ Yes	□No
b	. What	corrective action has the command taken when a trend has k	peen identified? Discus	ssions on these matters d	lepend upo	n theissum
ì	ut Trai	nd and types of injuries and/or illnesses. Equipment, environment	nent, workplace habits, a	and proper body mechan	ies (ergon	omics) are alk
	Optio	is reviewed by command staff when addressing trends in the S	SCC workplace environs	ment		

## DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

### **OCCUPATIONAL SAFETY**

	(1) Are commanders, managers, and supervisors actively implementing corrective actions?			✓ Yes	□No
4.	COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	EVALUATED	ACTION REQUIRED	CORRECTE	D
li e contro	a. What is the composition of the COSC? The COSC is comprised	d of the following uniform	n and non-uniform person	nnel: Cap	tain
	Champion, Lt. DePaola, PSDS[I Carr, Sergeant Obregon (Comn	nand Safety Coordinator),	PSDSI Snow, OSSI Jaur	regui, Offi	cer Schroeder,
	PSDtf Jewell, and PSDI Franklin.				
	(1) Is there representation from each collective bargaining unit	?		✓ Yes	□No
	(2) Management and supervisory representation?			✓ Yes	□No
	(3) Command Safety Coordinator assigned?			✓ Yes	□No
	(4) Command Safety Coordinator active and effective?			✓ Yes	□No
	(5) Are committee assignments rotated?			✓ Yes	□No
	(6) COSC meetings held quarterly?			✓ Yes	□No
	(7) Are meetings held more frequently when goals are not being	g attained?		✓ Yes	□No
	(8) Do all committee members attend the meetings?			✓ Yes	□No
k	o. Are roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
_	(1) Do committee members understand their roles and respons	ibilities?		✓ Yes	□No
	(2) Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3) Are departmental and Division Occupational Safety meeting	s minutes readily availab	le?	✓ Yes	□No
	(4) Are these minutes utilized for Area meetings?			✓ Yes	□No
	(5) Are assignments given during Area meetings?			✓ Yes	□No
С	. Minutes prepared for the COSC meeting?			✓ Yes	□No
	(1) Recording secretary appointed?			✓ Yes	□No
	(2) Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
	(3) Are minutes included in IIPP file?			✓ Yes	□No
	(4) Minutes maintained current year, plus three?			✓ Yes	□No
	(5) Minutes forwarded through channels?			✓ Yes	□No
d.	. Is the COSC effective?			✓ Yes	□No
	(1) Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□No
	(2) COSC proactive to eliminate potential causes of accidents a	nd injuries?		✓ Yes	□No
	(3) COSC disseminate current information and training regarding	g health and safety issue	s?	☑ Yes	☐ No
е.	production regarding floating and	l safety?		✓ Yes	□No
f.	against state at a recognition.			✓ Yes	□No
g.	Does the command maintain an effective health and safety comm	nunications system?			□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?	✓ Yes	□No
(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	✓ Yes	□No
(3) Do all members of the command participate in distribution of safety and health information?	✓ Yes	□No
(4) COSC minutes posted in a timely manner?	✓ Yes	□No
(5) Required posters prominently displayed?	✓ Yes	□No
(6) COSC maintain the Command Occupational Safety Bulletin Board?	✓ Yes	□No
(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific member	rs? 📝 Yes	□No
5. DOCUMENTATION EVALUATED ACTION REQUIRED	CORRECTED	
a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?	✓ Yes	□No
b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, utilized to request driver's license record check and filed in the employee's field folder?	✓ Yes	□No
c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	✓ Yes	□No
(1) Are required injuries and illnesses logged?	✓ Yes	□No
(2) Entries made within six working days of notification of an employee injury or illness?	✓ Yes	□No
(3) Is lost-time and limited-duty documentation accurate?	✓ Yes	□No
(4) Retention according to policy?	✓ Yes	□No
(5) Readily accessible for review by Cal-OSHA?	✓ Yes	□No
(6) Previous calendar year log posted during February?	✓ Yes	□No
d. Are CHP 113s, Accident and Injury Report, compiled accurately?		□No
(1) Commander review and sign?		□No
(2) CHP 113s and attachments processed in a timely manner?	✓ Yes	□No
e. Does the command utilize the CHP 113A, Safety Inspection Checklist?		□No
(1) Are semiannual safety inspections conducted?		□No
(2) Are safety hazards identified?	✓ Yes	□No
(3) Is corrective action taken within 30 days?	✓ Yes	□No
(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?	✓ Yes	□No
f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	☑ Yes	□No
(1) Measures taken to correct situation within 30 days?		□No
(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	☑ Yes	□No
g. Are the CHP 121 series thoroughly and accurately completed?		□No
(1) Supervisory comments in-depth, clear, and concise?	✓ Yes	☐ No
(2) Commander signature on appropriate forms?	✓ Yes	☐ No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

h. Is CHP 208, Accident Prevention Report, thoroughly and accurately completed?  (1) Supervisor comments in-depth, clear, and concise?  (2) Commander review?  (3) Commander signs appropriate form?  (4) Properly routed within time limits?  (5) Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?  (6) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?  (7) Yes  (8) Safety recognition emblem summary current?  (9) Yes  (1) Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (2) Copies maintained with IIPP file?  (3) Command specific IIPP on file?  (4) All employees understand their roles and responsibilities?  (5) Yes  (6) All employees understand their roles and responsibilities?  (6) Forther the All of the All employees and responsibilities?	No No No No No No No
(1) Supervisor comments in-depth, clear, and concise?  (2) Commander review?  (3) Commander signs appropriate form?  (4) Properly routed within time limits?  (5) Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?  (7) Yes  (8) Properly routed within time limits?  (9) Yes  (1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record?  (1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?  (2) Safety recognition emblem summary current?  (8) Yes  (9) Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (9) Yes  (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (9) Yes  (1) Is specific IIPP on file?  (1) Is the program effective?  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes  (8) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	No No No No No No No
(2) Commander review? (3) Commander signs appropriate form? (4) Properly routed within time limits? (7) Yes  i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record? (7) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current? (8) Safety recognition emblem summary current? (9) Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current? (9) Yes  (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review? (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review? (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review? (1) Is the program of the Program of Injury and Illness Prevention Record. (1) Is the program effective? (2) Contains all required documents? (3) Discussed with all employees? (4) All employees understand their roles and responsibilities? (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review? (7) Yes (8) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review? (8) Yes	No No No No No No No
(3) Commander signs appropriate form?  (4) Properly routed within time limits?  i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?  (1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?  (2) Safety recognition emblem summary current?  (3) Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (4) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (5) Copies maintained with IIPP file?  (6) INJURY AND ILLNESS PREVENTION PROGRAM  (7) ACTION REQUIRED  (8) ACTION REQUIRED  (9) Yes  (1) Is the program effective?  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes  (8) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	No No No No No No
(4) Properly routed within time limits?  i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?	No No No No No
i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?	No No No No
(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?  (2) Safety recognition emblem summary current?  (3) Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (4) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (5) Copies maintained with IIPP file?  (6) INJURY AND ILLNESS PREVENTION PROGRAM  (7) ACTION REQUIRED  (8) CORRECTED  (9) Yes  (10) Is the program effective?  (11) Is the program effective?  (12) Contains all required documents?  (13) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?	No No No
(2) Safety recognition emblem summary current?  j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (2) Copies maintained with IIPP file?  (3) INJURY AND ILLNESS PREVENTION PROGRAM  EVALUATED  ACTION REQUIRED  CORRECTED  ACTION REQUIRED  CORRECTED  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	No No
j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?  (1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?  (2) Copies maintained with IIPP file?  (3) Is the program effective?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes  (8) Yes  (9) Yes  (10) Is the program effective?  (11) Is the program effective?  (12) Contains all required documents?  (13) Discussed with all employees?  (14) All employees understand their roles and responsibilities?  (15) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (17) Yes  (18) Yes  (29) Yes  (20) Contains all required documents?  (20) Yes  (31) Discussed with all employees?  (42) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	No No
(1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?	No
(2) Copies maintained with IIPP file?  6. INJURY AND ILLNESS PREVENTION PROGRAM  a. Command specific IIPP on file?  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes  (8) Yes	
6. INJURY AND ILLNESS PREVENTION PROGRAM  a. Command specific IIPP on file?  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  ACTION REQUIRED  ACTION REQUIRED  ACTION REQUIRED  ACTION REQUIRED  Yes  Yes	No
a. Command specific IIPP on file?  (1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	
(1) Is the program effective?  (2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes  (8) Yes	
(2) Contains all required documents?  (3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (7) Yes	No
(3) Discussed with all employees?  (4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?  (6) Yes	No
(4) All employees understand their roles and responsibilities?  (5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?	No
(5) Each employee completed CHP 712A, Injury and Illness Prevention Program Orientation and Review?	No
	No
(6) New employees review and complete CHP 712A Injury and Illness Provention Designs Orientation	No
and Daviews	No
(7) Are unsafe hazards or conditions identified, investigated, corrected, and documented?	No
(8) Is required documentation maintained according to policy?	No
COMMUNICATION WITH DOSH  EVALUATED  ACTION REQUIRED  CORRECTED	
a. Employees aware of procedures regarding DOSH inspections?	No
b. Command's documents readily available for review by DOSH Compliance Officer?	No
. HAZARDOUS SUBSTANCE PROGRAM  EVALUATED  ACTION REQUIRED  CORRECTED	
a. Does command have a written Hazardous Substance Program for substances used within that command?	No
(1) Are hazardous substances identified and properly labeled?	
(2) Warning signs posted?	No
(3) Material Safety Data Sheets readily available?	No No
(4) Employees receive training?	No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

PHP 453M (Rev. 5-06) OPI 009

(	(5) Training documented?			✓ Yes	☐ No
(	(6) Employees informed of their right to applicable med	lical and exposure informa	tion?	✓ Yes	☐ No
. HAZ	AZARDOUS EXPOSURE CONTROL PROGRAMS	EVALUATED	ACTION REQUIRED	CORRECTED	):
a. /	Activities identified within command that may require ex	posure to hazardous cond	itions?	✓ Yes	□No
(	(1) Appropriate engineering and/or administrative contr	ols implemented?		✓ Yes	☐ No
(	(2) Protective equipment provided in accordance with b	pargaining unit agreements	97	✓ Yes	□No
(	(3) Employees trained on use and maintenance of equi	pment?		✓ Yes	□ No
(4	(4) Training documented?			✓ Yes	□No

Flazardous materials stored at the SCC facility are kept in three separate rooms. These rooms allow very limited access to SCC personnel. The SCC facility is home to two other agencies (Department of General Services (DGS) and Caltrans. The aforementioned rooms, and the materials stored in them, are only readily available to DGS and Caltrans "specified" employees who have the responsibility of maintaining the facility in good working order. CHP uniform personnel have access to these rooms, for security purposes only, but do not work in or around these rooms on a regular basis. There are no non-uniformed personnel that either have access or have the necessity to have access to these designated fooms. The materials are identified and maintained per Cal OSHA/federal standards.

#### STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
214 - SCC	Valley	
EVALUATED BY		DATE
R. R. Obregon/T.	Howell	03/12/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluation	Formal Evaluation  Informal Evaluation			
FOLLOW-UP REQUIRED  Yes No	☐ Correction Report	COMMANDER'S REVIEW	DATE 5/	11/09
1. GOALS AND ACCOMP	LISHMENTS	EVALUATED ACTION	CORRECTED CORRECTED	D
a. Is the command fami Safety Manual, Chap	liar with the Occupational Safety Progr ter 13?	ram as outlined in HPM 10.6, Occup	ational 🗹 Yes	□No
(1) Are goals develo	ped in accordance with departmental p	policy?	✓ Yes	□No
(2) Are environment	al factors, exposure factors, and past e	experience/trends considered when	setting goals?	□No
(3) Are illness and n	on-serious/non-traumatic injuries exclu	uded from occupational safety goals	?	□No
(4) Are goals approp	riately categorized?			□No
(5) Are goals realisti	c?			□No
(6) Are goals consist	tent with departmental objectives?		✓ Yes	□No
(7) Is input from all le	evels considered before goals are esta	ablished?	✓ Yes	□ No
b. Are goals being accor	mplished?		✓ Yes	□ No
(1) Accurate reporting	g on CHP 113, Accident and Injury Re	eport?	✓ Yes	□No
(2) Are accidents inc	reasing?		☐ Yes	☑ No
(3) Are injuries increa	asing?		☐ Yes	☑ No
(4) Why are they incr	reasing/decreasing? All SCC employe	ees review and are briefed with Occ	upational Safety information	on on a
regular basis via	shift briefings and training days. Upo	on review of the most recent (last 5 y	ears) Occupational Safety	statistics,
Sacramento Com	munications Center (SCC) has met or	exceeded occupational goals each y	ear.	
(5) Is CHP 113, Accid	dent and Injury Report, posted or readi	ily accessible?		□No
(6) Are employees kr	nowledgeable about goals and achieve	ements?		□No
(7) Are employees pr	roviding suggestions toward goal attain		✓ Yes	□No
2. PARTICIPATION		EVALUATED ACTION	CORRECTED CORRECTED	
a. Commander actively in	nvolved in program?		✓ Yes	□No
(1) Commander activ	e in injury/illness case management?		✓ Yes	□No
(2) What is the comm	ander's attitude regarding occupations	al safety? The Commander expects	that the various units work	ing in the
SCC facility shall	be represented at the Quarterly Occu	pational Safety Meetings. The Com	mander ensures all departr	nental issues
and information b	e provided to employees through unit	representation and via the quarterly	meetings and shift briefin	gs.

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

-			
	(3) Occupational safety issues discussed at staff meetings and training days?	<b></b> Yes	□No
	(4) Are safety issues in the meeting minutes?	☑ Yes	□ No
	(5) Commander comments regarding safety issues in performance evaluations?	✓ Yes	□No
	(6) Does the commander ensure use of appropriate safety equipment?	☑ Yes	□No
	b. Are managers/supervisors actively involved in the program?	✓ Yes	□ No
	(1) Are managers/supervisors involved in case management?	☑ Yes	□No
	(2) Do they have the appropriate attitude?	✓ Yes	□No
	(3) Are managers monitoring supervisors' progress and efforts to attain goals?	☑ Yes	□No
	(4) Are supervisors monitoring employees' efforts?	✓ Yes	□No
	(5) Do managers comment on safety issues in performance evaluations?	✓ Yes	□ No
	(6) Do supervisors comment on safety issues in performance evaluations?	☑ Yes	□No
	(7) Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□No
	c. Are employees actively involved in the Occupational Safety Program?	✓ Yes	□No
	(1) Are employees involved in their case management?	✓ Yes	□No
	(2) Are employees knowledgeable about safety goals?	✓ Yes	□No
X	(3) Are they aware of the command's achievements?	✓ Yes	□No
	(4) Are employees practicing safety while performing their duties?		□No
	(5) Are employees reporting unsafe conditions and/or work practices?	✓ Yes	□No
	(6) Do employees work cooperatively to minimize hazards?	✓ Yes	□No
	(7) Do employees offer suggestions to improve occupational safety?	✓ Yes	□No
	(8) Is employee equipment properly used and maintained?	✓ Yes	□ No
3.	B. ACCIDENT AND INJURY TRENDS	RED CORRECTE	
	a. Commander's method of identifying trends? The Commander and Occupational Safety Committee of	liscuss the status of in	jury/illness
	cases in the facility in general terms. Job related duties, including repetitive type body movements.	and conditions of shar	red and CHP
	specific work areas are discussed and considered prior to posting shift briefings and/or training that	would address these is	ssues. These
	discussions occur on an as needed and quarterly basis.		
	(1) Are accidents and injuries being monitored to identify trends?	✓ Yes	□No
	(2) Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 30 Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	00, ✓ Yes	□No
	(3) Are personnel in the command aware of current and potential trends?	✓ Yes	□No
	b. What corrective action has the command taken when a trend has been identified? Discussions on the	ese matters depend up	on the issues
	at hand and types of injuries and/or illnesses. Equipment, environment, workplace habits, and proper	oody mechanics (ergor	omics) are all
	options reviewed by command staff when addressing trends in the SCC workplace environment.		¥(
		Annual Control of the	

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

(1) Are commanders, managers, and supervisors actively implementing corrective actions?			✓ Yes	□No		
4. C	OM	MAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	EVALUATED	ACTION REQUIRED	CORRECTED	
a	. W	hat is the composition of the COSC? The COSC is comprised	of the following uniform	and non-uniform perso	nnel: Capt	ain
	С	hampion, Lt. DePaola, PSDSII Carr. Sergeant Obregon (Comma	and Safety Coordinator).	PSDSI Snow, OSSI Jau	regui, Offic	er Schroeder.
	P	SDII Jewell, and PSDI Franklin.				
	(1)	Is there representation from each collective bargaining unit?			✓ Yes	□No
	(2)	Management and supervisory representation?			✓ Yes	□ No
	(3)	Command Safety Coordinator assigned?			✓ Yes	□No
	(4)	Command Safety Coordinator active and effective?			✓ Yes	□No
	(5)	Are committee assignments rotated?			✓ Yes	□No
	(6)	COSC meetings held quarterly?			Yes	□No
	(7)	Are meetings held more frequently when goals are not being	attained?		✓ Yes	□No
	(8)	Do all committee members attend the meetings?			Yes	□No
b.	Are	e roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
line-	(1)	Do committee members understand their roles and responsible	pilities?		✓ Yes	□No
	(2)	Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3)	Are departmental and Division Occupational Safety meetings	minutes readily availab	le?	✓ Yes	□No
	(4)	Are these minutes utilized for Area meetings?			✓ Yes	□No
	(5)	Are assignments given during Area meetings?			✓ Yes	□No
C.	Mir	nutes prepared for the COSC meeting?			✓ Yes	□No
	(1)	Recording secretary appointed?			✓ Yes	□No
	(2)	Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
	(3)	Are minutes included in IIPP file?			✓ Yes	□No
	(4)	Minutes maintained current year, plus three?			✓ Yes	□No
	(5)	Minutes forwarded through channels?			✓ Yes	□No
d.	Is ti	ne COSC effective?			✓ Yes	□No
	(1)	Are COSC recommendations clear, concise and pertinent to t	he command?		✓ Yes	□No
	(2)	COSC proactive to eliminate potential causes of accidents an	d injuries?		✓ Yes	□No
	(3)	COSC disseminate current information and training regarding	health and safety issue	s?	✓ Yes	□No
e.	Do	all personnel receive current information regarding health and	safety?		✓ Yes	□No
f.	Are	outside agency safety programs utilized as a resource?			✓ Yes	□No
g.	Doe	s the command maintain an effective health and safety comm	unications system?		✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

OTT 405W (New 3-00) OT 1005	
(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?	☑ Yes ☐ No
(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	✓ Yes  ☐ No
(3) Do all members of the command participate in distribution of safety and health information?	✓ Yes  ☐ No
(4) COSC minutes posted in a timely manner?	✓ Yes       ☐ No
(5) Required posters prominently displayed?	✓ Yes □ No
(6) COSC maintain the Command Occupational Safety Bulletin Board?	√ Yes □ No
(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific members?	✓ Yes   ☐ No
5. DOCUMENTATION  EVALUATED  ACTION REQUIRED	CORRECTED
a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?	☑ Yes □ No
b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, utilized to request driver's license record check and filed in the employee's field folder?	☑ Yes □ No
c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	✓ Yes   ☐ No
(1) Are required injuries and illnesses logged?	✓ Yes   ☐ No
(2) Entries made within six working days of notification of an employee injury or illness?	✓ Yes    No
(3) Is lost-time and limited-duty documentation accurate?	✓ Yes   ☐ No
(4) Retention according to policy?	✓ Yes    No
(5) Readily accessible for review by Cal-OSHA?	
(6) Previous calendar year log posted during February?	✓ Yes   ☐ No
d. Are CHP 113s, Accident and Injury Report, compiled accurately?	✓ Yes   ☐ No
(1) Commander review and sign?	✓ Yes  ☐ No
(2) CHP 113s and attachments processed in a timely manner?	✓ Yes    No
e. Does the command utilize the CHP 113A, Safety Inspection Checklist?	✓ Yes       □ No
(1) Are semiannual safety inspections conducted?	✓ Yes       □ No
(2) Are safety hazards identified?	✓ Yes   ☐ No
(3) Is corrective action taken within 30 days?	✓ Yes   ☐ No
(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?	✓ Yes   ☐ No
f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	
(1) Measures taken to correct situation within 30 days?	✓ Yes   ☐ No
(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	✓ Yes    No
g. Are the CHP 121 series thoroughly and accurately completed?	
(1) Supervisory comments in-depth, clear, and concise?	
(2) Commander signature on appropriate forms?	☑ Yes □ No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

-							
		(3)	Routed within time frames?			✓ Yes	□No
Ī	h.	ls (	CHP 208, Accident Prevention Report, thoroughly and accura	tely completed?		✓ Yes	□No
		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
		(2)	Commander review?			✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□No
	i.	Are	injuries and accidents documented on CHP 442, Individual A	ccident, Injury and Safet	y Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, current?		✓ Yes	□No
		(2)	Safety recognition emblem summary current?		2 2011	✓ Yes	□No
	j.	Are	CHP 712As, Injury and Illness Prevention Program Orientation	on and Review, kept curr	ent?	✓ Yes	□No
		(1)	Is specific safety training documented on CHP 712, Employe	ee Emergency Action Pla	an Review?	✓ Yes	□No
		(2)	Copies maintained with IIPP file?	0		✓ Yes	□No
6.	. IN	JUR	Y AND ILLNESS PREVENTION PROGRAM	EVALUATED	ACTION REQUIRED	CORRECTED	)
	a.	Cor	mmand specific IIPP on file?			✓ Yes	□No
		(1)	Is the program effective?			✓ Yes	□No
		(2)	Contains all required documents?			✓ Yes	□No
		(3)	Discussed with all employees?			✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?			✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program Orienta	ation and Review?	✓ Yes	□No
		(6)	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention Progr	ram Orientation	✓ Yes	□No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and documented	1?	✓ Yes	□No
		(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	СО	MM	UNICATION WITH DOSH	EVALUATED	ACTION REQUIRED  NO	CORRECTED	)
	a.	Emp	oloyees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b.	Con	nmand's documents readily available for review by DOSH Co			✓ Yes	□No
8.	НА	ZAR	DOUS SUBSTANCE PROGRAM	EVALUATED	ACTION REQUIRED	CORRECTED	)
	a.	Doe	s command have a written Hazardous Substance Program fo	or substances used within	n that command?	✓ Yes	□No
		(1)	Are hazardous substances identified and properly labeled?			✓ Yes	□No
		(2)	Warning signs posted?			✓ Yes	□No
3		(3)	Material Safety Data Sheets readily available?			✓ Yes	□No
		(4)	Employees receive training?			✓ Yes	□No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

	(5) T	raining documented?			✓ Yes	□No
	(6) E	Employees informed of their right to applicable medical and e	exposure information?		✓ Yes	□No
9.	HAZARD	OOUS EXPOSURE CONTROL PROGRAMS	EVALUATED	ACTION REQUIRED	CORRECTED	Vi
á	a. Activit	ties identified within command that may require exposure to	hazardous conditions?		✓ Yes	□No
	(1) A	ppropriate engineering and/or administrative controls imple	mented?		✓ Yes	□No
	(2) P	Protective equipment provided in accordance with bargaining	unit agreements?		☑ Yes	□No
	(3) E	imployees trained on use and maintenance of equipment?			✓ Yes	□No
	(4) T	raining documented?			✓ Yes	□No

Hazardous materials stored at the SCC facility are kept in three separate rooms. These rooms allow very limited access to SCC personnel. The SCC facility is home to two other agencies (Department of General Services (DGS) and Caltrans. The aforementioned rooms, and the materials stored in them, are only readily available to DGS and Caltrans "specified" employees who have the responsibility of maintaining the facility in good working order. CHP uniform personnel have access to these rooms, for security purposes only, but do not work in or around these rooms on a regular basis. There are no non-uniformed personnel that either have access or have the necessity to have access to these designated rooms. The materials are identified and maintained per Cal OSHA/federal standards.

### **COMMAND INSPECTION PROGRAM** EXCEPTIONS DOCUMENT

Command:	Diyision:	Chapter:	
260	VALLEY	12	
Inspected by:		Date:	1
Lo. FERR	ro	210	109

. 4	ag	е	1	of	2

age 1012						
INSTRUCTIONS: This document shall to number of the inspection in the Chapter shall be routed to and its due date. This improvement, identified deficiencies, co	Inspecti docume	on number. Under "Forwent shall be utilized to do	ard to:" enter the nex cument innovative pra	t level of command where actices, suggestions for sta	the document atewide	
TYPE OF INSPECTION  Division Level Command Level  Executive Office Level		Total hours expended on the inspection:		☐ Corrective Action Plan Included ☐ Attachments Included		
Follow-up Required:	Forwa	rd to:				
X Yes □ No	Due D	ate:				
Chapter Inspection:			Harris Harris	<b>是另名是公司</b>		
Inspector's Comments Regar	ding Ir	novative Practices	S:			
Command Suggestions for S						
Command daggestions for o	atevic	de improvement.				
V.						
Inspector's Findings:						
Commander's Response:	Concu	ır or 🗌 Do Not Cor	cur (Do Not Conc	ur shall document basis	s for response)	
SRE ATTACHES	· M	JUD CONF	MNNG	Calactiva	ACTION.	

Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, tc.)

# COMMAND INSPECTION PROGRAM FXCEPTIONS DOCUMENT

age 2 of 2

Command: Z(oO	Pivision:	Chapt	er:	
Inspected by:	Fin9	Date:	10	09

Required Action	2
Corrective Action Plan/Timeline	
AN AOSC HAS BEEN ESTABLISHED AND QUARTERLY MRESTWOS POR SCARBULED.	Ç
ARTA OCCUPATIONAL SAFRY GOALS HAVE REEN CRITTUD.	
AN ARTA EAP IS CURRENTLY IN ITS FINAL STAGE OF PLVICIO.	

	^	
Employee would like to discuss this report with	COMMANDER'S SIGNATURE	DATE
the reviewer.	100	1 - 1 - 6
(See HPM 9.1, Chapter 8 for appeal procedures.)		5/29/07
	INSPECTOR'S SIGNATURE	DATE
	1 < 211)	5/29/09
UD in an diagram of the control of the	REVIEWER'S SIGNATURE	DATE
Reviewer discussed this report with	REVIEWERS SIGNATURE	2-12-3
employee	1	7/2//3
☐ Do not concur	01 03	1000

#### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Rancho Cordova Area	Valley	260
EVALUATED BY		DATE
Greg Ferrero		3/10/09

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluation  Information	SUSPENSE DATE				
FOLLOW-UP REQUIRED	☐ Correction Report	COMMANDER'S REVIEW		DATE /	7
✓ Yes   ☐ No	= Odification Report	-1		3/0	109
	BY	EVALUATES	Lieral projuges	1 1	
1. GOALS AND ACCOMPLISHME	NTS	3/10/09	yes	CORRECTED	,
a. Is the command familiar with	the Occupational Safety Program	m as outlined in HPM 10	.6, Occupational	,	
Safety Manual, Chapter 13?				✓ Yes	□ No
(1) Are goals developed in a	ccordance with departmental po	dicy?		✓ Yes	□ No
(2) Are environmental factor	s, exposure factors, and past ex	perience/trends conside	red when setting goals?	✓ Yes	□No
(3) Are illness and non-serio	us/non-traumatic injuries exclud	ed from occupational sa	fety goals?	✓ Yes	□No
(4) Are goals appropriately o	ategorized?			✓ Yes	□No
(5) Are goals realistic?				✓ Yes	□No
(6) Are goals consistent with	departmental objectives?				□No
(7) Is input from all levels con	nsidered before goals are establ	ished?		✓ Yes	□No
b. Are goals being accomplished	1?			☐ Yes	□No
(1) Accurate reporting on CH	P 113, Accident and Injury Repo	ort?		☐ Yes	□No
(2) Are accidents increasing?				☐ Yes	□No
(3) Are injuries increasing?				☐ Yes	□No
(4) Why are they increasing/o	lecreasing? There is no baselin	e for statistics from pre-	ious years.		
(5) Is CHP 113, Accident and	Injury Report, posted or readily	accessible?		✓ Yes	□No
(6) Are employees knowledge	eable about goals and achievem	ents?		✓ Yes	□No
(7) Are employees providing s	suggestions toward goal attainm	ent?		√ Yes	□No
. PARTICIPATION		3/10/09	ACTION REQUIRED	CORRECTED	
a. Commander actively involved i	n program?			✓ Yes	□No
(1) Commander active in injur	y/illness case management?			✓ Yes	□No
(2) What is the commander's a	attitude regarding occupational s	safety? Occupational Sa	afety for the employees is	my number	rone
priority.					

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

JI 11 100	(Nev. 3-00) OF1 009		
(3	Occupational safety issues discussed at staff meetings and training days?	✓ Yes	□No
(4	4) Are safety issues in the meeting minutes?	☐ Yes	□No
(5	5) Commander comments regarding safety issues in performance evaluations?	✓ Yes	□ No
(6	Does the commander ensure use of appropriate safety equipment?	✓ Yes	□No
b. A	re managers/supervisors actively involved in the program?	✓ Yes	□ No
(1	) Are managers/supervisors involved in case management?	✓ Yes	□No
(2)	2) Do they have the appropriate attitude?	✓ Yes	□No
(3)	Are managers monitoring supervisors' progress and efforts to attain goals?	✓ Yes	□No
(4)	Are supervisors monitoring employees' efforts?	✓ Yes	□No
(5)	) Do managers comment on safety issues in performance evaluations?	✓ Yes	□No
(6)	) Do supervisors comment on safety issues in performance evaluations?	√ Yes	□No
(7)	) Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□No
c. Are	re employees actively involved in the Occupational Safety Program?	☐ Yes	□No
(1)	Are employees involved in their case management?	☐ Yes	□No
(2)	Are employees knowledgeable about safety goals?	☐ Yes	□No
(3)	Are they aware of the command's achievements?	☐ Yes	☐ No
(4)	Are employees practicing safety while performing their duties?	☐ Yes	☐ No
(5)	Are employees reporting unsafe conditions and/or work practices?	☐ Yes	□No
(6)	Do employees work cooperatively to minimize hazards?	☐ Yes	□No
(7)	Do employees offer suggestions to improve occupational safety?	☐ Yes	□No
(8)	Is employee equipment properly used and maintained?	☐ Yes	□ No
ACCID	DENT AND INJURY TRENDS  EVALUATED  3/10/09  ACTION REQUI	RED CORRECTED	)
a. Con	mmander's method of identifying trends? The commander will personally review and discuss all	accidents and injuries	with the
	ployee and the supervisors.		
(1)	Are accidents and injuries being monitored to identify trends?	☐Yes	□No
	Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 30 Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	0, ☐ Yes	□No
(3)	Are personnel in the command aware of current and potential trends?	☐ Yes	□ No
b. Wha	at corrective action has the command taken when a trend has been identified?		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

-	(1) Are commanders, managers, and supervisors actively implementing corrective actions?				☐ Yes	□No
4.	COM	IMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	EVALUATED 3/10/09	ACTION REQUIRED Yes	CORRECTED	
	a. V	What is the composition of the COSC?	IF: The state of t	11.5%		
	(1	) Is there representation from each collective bargaining unit?			✓ Yes	□No
	(2	) Management and supervisory representation?			✓ Yes	□No
	(3	) Command Safety Coordinator assigned?			✓ Yes	□No
	(4	) Command Safety Coordinator active and effective?			✓ Yes	□No
	(5	) Are committee assignments rotated?			☐ Yes	□No
	(6	) COSC meetings held quarterly?			√ Yes	□No
	(7	Are meetings held more frequently when goals are not being	attained?		☐ Yes	□No
	(8)	Do all committee members attend the meetings?			☐ Yes	□No
Ł	o. Ar	e roles and responsibilities defined in accordance with IIPP?			☐ Yes	□No
	(1)	Do committee members understand their roles and responsil	oilities?		☐ Yes	□No
	(2)	Is an agenda prepared prior to the meeting?			☐ Yes	□No
	(3)	Are departmental and Division Occupational Safety meetings	minutes readily availab	le?	☐ Yes	□No
	(4)	Are these minutes utilized for Area meetings?			☐ Yes	□No
	(5)	Are assignments given during Area meetings?			☐ Yes	□No
C.	. Mir	nutes prepared for the COSC meeting?			✓ Yes	□No
	(1)	Recording secretary appointed?			✓ Yes	□No
	(2)	Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
	(3)	Are minutes included in IIPP file?			☐ Yes	□No
	(4)	Minutes maintained current year, plus three?			✓ Yes	□No
	(5)	Minutes forwarded through channels?			✓ Yes	□No
d.	ls t	ne COSC effective?			☐ Yes	□No
	(1)	Are COSC recommendations clear, concise and pertinent to t	he command?		☐ Yes	□No
	(2)	COSC proactive to eliminate potential causes of accidents an	d injuries?		☐ Yes	□No
	(3)	COSC disseminate current information and training regarding	health and safety issue	s?	☐ Yes	□No
e.	Do a	all personnel receive current information regarding health and	safety?		☐ Yes	□No
f.	Are o	outside agency safety programs utilized as a resource?		1251	☐ Yes	□No
g.	Doe	s the command maintain an effective health and safety comm	unications system?		☐ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

_					
	(1) Potential hazards reported on CHP 113B, Hazard Repor	rt/Inspection?		☐ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, repo	ort disseminated acco	ording to policy?	☐ Yes	□No
	(3) Do all members of the command participate in distribution	on of safety and healt	h information?	☐ Yes	□No
	(4) COSC minutes posted in a timely manner?			☐ Yes	□No
	(5) Required posters prominently displayed?	✓ Yes	□No		
_	(6) COSC maintain the Command Occupational Safety Bulle	etin Board?		☐ Yes	□No
	(7) Are responsibilities for the Occupational Safety Bulletin E	Board contents assign	ned to specific members?	☐ Yes	□No
5.	DOCUMENTATION	3/10/09	ACTION REQUIRED Yes	CORRECTED	)
	<ul> <li>a. STD 261s, Authorization to Use Privately Owned Vehicles on filed in the employee's field folder?</li> </ul>	ı State Business, con	npleted annually and	☑ Yes	□No
	<ul> <li>DMV INF 254, Government Agency Request for Driver Licens to request driver's license record check and filed in the employ</li> </ul>	se/Identification Reco oyee's field folder?	ord Information, utilized	□Yes	☑ No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?	?		☐ Yes	□No
	(1) Are required injuries and illnesses logged?			☐ Yes	□No
	(2) Entries made within six working days of notification of an	employee injury or il	Iness?	☐ Yes	□ No
L	(3) Is lost-time and limited-duty documentation accurate?			☐ Yes	□ No
	(4) Retention according to policy?			☐ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?			☐ Yes	□No
	(6) Previous calendar year log posted during February?			☐Yes	□No
(	d. Are CHP 113s, Accident and Injury Report, compiled accurate	ely?		☐ Yes	□No
	(1) Commander review and sign?			☐ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner	r?		☐ Yes	□No
•	e. Does the command utilize the CHP 113A, Safety Inspection C	Checklist?		☐Yes	□No
	(1) Are semiannual safety inspections conducted?			☐ Yes	□No
	(2) Are safety hazards identified?			☐ Yes	□No
	(3) Is corrective action taken within 30 days?			☐Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with II	IPP and retained acc	ording to policy?	☐ Yes	□No
f.	Are unsafe conditions identified and documented on CHP 113E	3, Hazard Report/Ins	pection?	☐ Yes	□No
	(1) Measures taken to correct situation within 30 days?			☐ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or atta	ached to IIPP?		☐ Yes	□No
g	Are the CHP 121 series thoroughly and accurately completed?	>		✓ Yes	□No
	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
	(2) Commander signature on appropriate forms?			√ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

4						
	(3) Routed within time frames?			✓ Yes	□No	
	h. Is CHP 208, Accident Prevention Report, thoroughly and ac	✓ Yes	□No			
	(1) Supervisor comments in-depth, clear, and concise?		✓ Yes	□No		
	(2) Commander review?	(2) Commander review?				
_	(3) Commander signs appropriate form?	✓ Yes	□No			
	(4) Properly routed within time limits?	✓ Yes	□No			
	i. Are injuries and accidents documented on CHP 442, Individu	✓ Yes	□No			
	(1) Are CHP 442s, Individual Accident, Injury and Safety Re	✓ Yes	□No			
	(2) Safety recognition emblem summary current?			☐ Yes	☑ No	
	j. Are CHP 712As, Injury and Illness Prevention Program Orier	ntation and Review, ke	ept current?	☐ Yes	☑ No	
	(1) Is specific safety training documented on CHP 712, Emp	(1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?				
	(2) Copies maintained with IIPP file?				☑ No	
6	6. INJURY AND ILLNESS PREVENTION PROGRAM	3/9/09	Yes	CORRECTED	2	
	a. Command specific IIPP on file?			☐ Yes	☑ No	
	(1) Is the program effective?				□No	
	(2) Contains all required documents?				□No	
	(3) Discussed with all employees?	☐ Yes	□No			
	(4) All employees understand their roles and responsibilities	s?		☐ Yes	□No	
	(5) Each employee completed CHP 712A, Injury and Illness	Prevention Program	Orientation and Review?	☐ Yes	□ No	
	(6) New employees review and complete CHP 712A, Injury and Review?	and Illness Preventio	n Program Orientation	☐ Yes	□No	
	(7) Are unsafe hazards or conditions identified, investigated,	, corrected, and docu	mented?	☐ Yes	□No	
	(8) Is required documentation maintained according to policy	y?		☐ Yes	□No	
7.	. COMMUNICATION WITH DOSH	EVALUATED 3/10/09	ACTION REQUIRED	CORRECTED		
	a. Employees aware of procedures regarding DOSH inspections	s?		Yes	☑No	
	b. Command's documents readily available for review by DOSH	l Compliance Officer?	)	✓ Yes	□No	
	HAZARDOUS SUBSTANCE PROGRAM	3/9/09	No: Division	CORRECTED		
	a. Does command have a written Hazardous Substance Program	☐ Yes	□No			
	(1) Are hazardous substances identified and properly labeled	d?		☐ Yes	□No	
	(2) Warning signs posted?	11		☐ Yes	□No	
Į,	(3) Material Safety Data Sheets readily available?			☐ Yes	□No	
	(4) Employees receive training?			☐ Yes	□No	

# DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(5) Training documented?			☐ Yes	□ No
(6) Employees informed of their right to applicable medical and exposure information?			☐ Yes	□No
. HAZARDOUS EXPOSURE CONTROL PROGRAMS	3/9/09	ACTION REQUIRED NO	CORRECTED	
a. Activities identified within command that may require expo	✓ Yes	□No		
(1) Appropriate engineering and/or administrative controls implemented?				□ No
(2) Protective equipment provided in accordance with bargaining unit agreements?				□No
(3) Employees trained on use and maintenance of equipment?			✓ Yes	□No
(4) Training documented?			✓ Yes	□No

#### RANCHO CORDOVA AREA 2009 OCCUPATIONAL SAFETY GOALS

#### GOAL: MINIMIZE ACCIDENTS, INJURIES, AND ATTENDANT COSTS.

1.	Preventable recordable automobile collisions	1
2.	Preventable recordable motorcycle collisions	1
3.	Preventable disabling injuries	1
4.	All accidental discharges of weapons	0

Since Rancho Cordova is a new Area, the following goals are based on goals submitted from other Areas in Valley Division with comparable staffing levels.

<u>Preventable Recordable Automobile Collisions:</u> To experience no more than one preventable automobile collision.

The Area believes a goal of one preventable automobile collision is realistic and achievable through consistent reinforcement of safety awareness.

<u>Preventable Recordable Motorcycle Collisions:</u> To experience no more than one preventable motorcycle collision.

The Area believes a goal of one preventable motorcycle collision is realistic and achievable through consistent reinforcement of safety awareness.

<u>Preventable Disabling Injuries:</u> To experience **no more than one** preventable traumatic disabling injury.

Area supervision is routinely reminding officers about the importance of working safely which will help the Area attain its goal.

Accidental Discharge of Weapons: To experience no accidental discharge of weapons.

The Area believes a goal of no accidental discharges of weapons to be attainable.

# COMMAND INSPECTION PROGRAM EXCEPTIONS DOCUMENT

Command: Placerville	Division: Valley	Chapter: 12
Inspected by: R. D. McAuliffe, Sgt. 9399		Date: 03/20/2009

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans, and may be used to appeal findings. A CHP 51 Memorandum may be used if additional space is required. TYPE OF INSPECTION ☐ Corrective Action Plan Included ☐ Division Level ☐ Command Level Appeal Included ☐ Executive Office Level Attachments Included Forward to: Commander's Signature: Date: Follow-up Required: Valley Division 05/01/2009 Sourvau ☐ Yes ⊠ No Due Date: 05/01/2009 Chapter Inspection: Twelve-Occupational Safety Inspector's Comments Regarding Innovative Practices: None Command Suggestions for Statewide Improvement: . Jone Inspector's Findings: There were no deficiencies found during the evaluation.

There are no corrective actions required.

Corrective Action Plan/Timeline

Required Action

# COMMAND INSPECTION PROGRAM XCEPTIONS DOCUMENT

Page 2

Command: Placerville	Division: Valley	Chapter: 12
Inspected by:	uliffe, Sgt. 9399	Date: 03/20/2009

Appeal Process: (Appeals shall be filed within five (5) business days of the completed chapter inspection).				
Placerville Area Commander's Basis for Appeal:				
Association in the state of the				
Appeal Review/Decision: (This shall be the only level of appeal).				
Lead Inspector's Signature:	Date:			
sponding Commander's Signature (for appeal):	Date:			

STATE OF CALIFORNIA AREA DIVISION NUMBER DEPARTMENT OF CALIFORNIA HIGHWAY PATROL 245 Valley AREA MANAGEMENT EVALUATION EVALUATED BY DATE

**OCCUPATIONAL SAFETY** 

CHP 453M (Rev. 5-06) OPI 009

RUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This

R.D.McAuliffe, Sgt. 9399

03/20/2009

TYPE OF EVALUATION	Den or pencil, and the Supplemer  Informal Evaluation	SUSPENSE DATE			
FOLLOW-UP REQUIRED	1	03/10/2009	1		
TOLLOW-OF REGONED	Correction Report	COMMANDER'S REVIEW	DATE		
☐ Yes ☑ No	BY	_ Wyouur	03/20/2009	9	
1. GOALS AND ACCOMPLIS	CORRECTED				
a. Is the command familia     Safety Manual, Chapte		ram as outlined in HPM 10.6, Occupational	☑ Yes	☐ No	
(1) Are goals develop	ed in accordance with departmental	policy?	☑ Yes	☐ No	
(2) Are environmental	factors, exposure factors, and past	experience/trends considered when setting goals?	☑ Yes	☐ No	
(3) Are illness and nor	n-serious/non-traumatic injuries excl	uded from occupational safety goals?	☑ Yes	☐ No	
(4) Are goals appropri	ately categorized?		☑ Yes	☐ No	
(5) Are goals realistic?			√ Yes	☐ No	
(6) Are goals consiste	(6) Are goals consistent with departmental objectives?				
(7) Is input from all lev	els considered before goals are esta	ablished?	✓ Yes	☐ No	
b. Are goals being accom	plished?		✓ Yes	⊡ No	
(1) Accurate reporting	on CHP 113, Accident and Injury Re	eport?	✓ Yes	☐ No	
(2) Are accidents incre	asing?		☐ Yes	✓ No	
(3) Are injuries increas	ing?		☐ Yes	☑ No	
(4) Why are they incre	asing/decreasing? Static ave	rage number s from last 3 years			
(5) Is CHP 113, Accide	nt and Injury Report, posted or read	fily accessible?	✓ Yes	☐ No	
(6) Are employees kno	wledgeable about goals and achieve	ements?	√ Yes	☐ No	
(7) Are employees prov	viding suggestions toward goal attai	nment?	✓ Yes	☐ No	
2. PARTICIPATION		EVALUATED ACTION REQUIRED 03/18/2009	CORRECTED		
a. Commander actively inv	olved in program?	0,	✓ Yes	☐ No	
(1) Commander active	in injury/illness case management?		☑ Yes	☐ No	
(2) What is the comma	nder's attitude regarding occupation	al safety? Keep everyone aware of all aspect	s of Occupation	onal Safety.	

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

01 11	7001	(Nev. 5-00) OF 1 009				
	(3)	Occupational safety issues discussed at staff meetings and	d training days?		☑ Yes	☐ No
	(4)	Are safety issues in the meeting minutes?			√ Yes	☐ No
	(5)	Commander comments regarding safety issues in performa	ance evaluations?		√ Yes	☐ No
	(6)	Does the commander ensure use of appropriate safety equ	ipment?		√ Yes	☐ No
b	. Ar	e managers/supervisors actively involved in the program?			√ Yes	☐ No
	(1)	Are managers/supervisors involved in case management?			✓ Yes	☐ No
	(2)	Do they have the appropriate attitude?			√ Yes	☐ No
	(3)	Are managers monitoring supervisors' progress and efforts	to attain goals?		☑ Yes	☐ No
	(4)	Are supervisors monitoring employees' efforts?			✓ Yes	☐ No
	(5)	Do managers comment on safety issues in performance ev	aluations?		☑ Yes	☐ No
	(6)	Do supervisors comment on safety issues in performance e	evaluations?		☑ Yes	☐ No
	(7)	Do managers/supervisors ensure the use of proper safety e	equipment?		☑ Yes	☐ No
С	. Are	e employees actively involved in the Occupational Safety Pro	gram?		√ Yes	☐ No
	(1)	Are employees involved in their case management?			☑ Yes	☐ No
	(2)	Are employees knowledgeable about safety goals?			☑ Yes	☐ No
	(3)	Are they aware of the command's achievements?			√ Yes	☐ No
	(4)	Are employees practicing safety while performing their dutie	es?		✓ Yes	☐ No
	(5)	Are employees reporting unsafe conditions and/or work pra-	ctices?		☑ Yes	☐ No
	(6)	Do employees work cooperatively to minimize hazards?			√ Yes	☐ No
	(7)	Do employees offer suggestions to improve occupational sa	afety?		√ Yes	☐ No
	(8)	Is employee equipment properly used and maintained?			☑ Yes	☐ No
. А	CCID	ENT AND INJURY TRENDS	3/15/2009	ACTION REQUIRED	CORRECTED	
a.	Cor	mmander's method of identifying trends? Stat Analy	vsis, review Officer's 41	5's and 100 forms, con	tinuous attenda	nce at
	con	nmunity meetings,, and staff meetings.			4.	-
	(1)	Are accidents and injuries being monitored to identify trends	s?		√ Yes	☐ No
	(2)	Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior med		ort, OSHA 300,	☑ Yes	☐ No
	(3)	Are personnel in the command aware of current and potential	al trends?		✓ Yes	☐ No
Ţ	Wha	at corrective action has the command taken when a trend ha	s been identified?			
_						

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

î.,	(1) Are commanders, managers, and supervisors actively implementing corrective actions?	☑ Yes	□ No
4.	COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)    EVALUATED   ACTION REQUIRED	CORRECTED	
	a. What is the composition of the COSC? Clerical, Special Duty, Road/Field Officers, and Supervisors,		
	(1) Is there representation from each collective bargaining unit?	☑ Yes	☐ No
	(2) Management and supervisory representation?	☑ Yes	☐ No
	(3) Command Safety Coordinator assigned?	☑ Yes	☐ No
	(4) Command Safety Coordinator active and effective?	√ Yes	☐ No
	(5) Are committee assignments rotated?	☑ Yes	☐ No
	(6) COSC meetings held quarterly?	☑ Yes	☐ No
	(7) Are meetings held more frequently when goals are not being attained?	√ Yes	☐ No
	(8) Do all committee members attend the meetings?	☑ Yes	☐ No
	b. Are roles and responsibilities defined in accordance with IIPP?	☑ Yes	☐ No
	(1) Do committee members understand their roles and responsibilities?	☑ Yes	☐ No
	(2) Is an agenda prepared prior to the meeting?	✓ Yes	☐ No
	(3) Are departmental and Division Occupational Safety meetings minutes readily available?	√ Yes	☐ No
	(4) Are these minutes utilized for Area meetings?	√ Yes	☐ No
	(5) Are assignments given during Area meetings?	√ Yes	☐ No
	c. Minutes prepared for the COSC meeting?	√ Yes	☐ No
	(1) Recording secretary appointed?	√ Yes	☐ No
	(2) Minutes posted on command's Occupational Safety Board?	✓ Yes	☐ No
	(3) Are minutes included in IIPP file?	☑ Yes	☐ No
	(4) Minutes maintained current year, plus three?	√ Yes	☐ No
	(5) Minutes forwarded through channels?	√ Yes	☐ No
c	d. Is the COSC effective?	√ Yes	☐ No
	(1) Are COSC recommendations clear, concise and pertinent to the command?	✓ Yes	☐ No
	(2) COSC proactive to eliminate potential causes of accidents and injuries?	√ Yes	☐ No
	(3) COSC disseminate current information and training regarding health and safety issues?	√ Yes	☐ No
3	e. Do all personnel receive current information regarding health and safety?	√ Yes	☐ No
t.	. Are outside agency safety programs utilized as a resource?	✓ Yes	☐ No
g	. Does the command maintain an effective health and safety communications system?	√ Yes	☐ No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

-			
5	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection?	☑ Yes	☐ No
	(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?	√ Yes	☐ No
	(3) Do all members of the command participate in distribution of safety and health information?	√ Yes	☐ No
	(4) COSC minutes posted in a timely manner?	☑ Yes	☐ No
	(5) Required posters prominently displayed?	☑ Yes	☐ No
	(6) COSC maintain the Command Occupational Safety Bulletin Board?	✓ Yes	☐ No
	(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific member	s? 🗸 Yes	☐ No
5.	. DOCUMENTATION EVALUATED ACTION REQUIRED 3/17/2009	CORRECTED	
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?	☑ Yes	□No
	b. DMV INF 254, Government Agency Request for Driver License/Identification Record Information, utilized to request driver's license record check and filed in the employee's field folder?	√ Yes	□ No
_	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?		☐ No
	(1) Are required injuries and illnesses logged?		☐ No
	(2) Entries made within six working days of notification of an employee injury or illness?		☐ No
	(3) Is lost-time and limited-duty documentation accurate?	√ Yes	☐ No
	(4) Retention according to policy?	✓ Yes	☐ No
	(5) Readily accessible for review by Cal-OSHA?	√ Yes	☐ No
	(6) Previous calendar year log posted during February?	☑ Yes	☐ No
	d. Are CHP 113s, Accident and Injury Report, compiled accurately?	☑ Yes	☐ No
	(1) Commander review and sign?	☑ Yes	☐ No
	(2) CHP 113s and attachments processed in a timely manner?	√ Yes	☐ No
	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?	√ Yes	☐ No
	(1) Are semiannual safety inspections conducted?	✓ Yes	☐ No
	(2) Are safety hazards identified?	✓ Yes	☐ No
	(3) Is corrective action taken within 30 days?	✓ Yes	☐ No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and retained according to policy?	√ Yes	☐ No
	f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?	√ Yes	☐ No
	(1) Measures taken to correct situation within 30 days?	☑ Yes	☐ No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to IIPP?	✓ Yes	☐ No
	T. Are the CHP 121 series thoroughly and accurately completed?	✓ Yes	☐ No
	(1) Supervisory comments in-depth, clear, and concise?	√ Yes	☐ No
	(2) Commander signature on appropriate forms?	✓ Yes	☐ No

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	100		(1011 0 00) 01 1 000				
	* 1	(3)	) Routed within time frames?			√ Yes	☐ No
	h.	ls	CHP 208, Accident Prevention Report, thoroughly and accura		☑ Yes	☐ No	
		(1)	Supervisor comments in-depth, clear, and concise?	√ Yes	☐ No		
		(2)	) Commander review?	√ Yes	☐ No		
		(3) Commander signs appropriate form?					☐ No
		(4)	Properly routed within time limits?			√ Yes	☐ No
_	i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record				☑ Yes	☐ No	
	(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?					☑ Yes	☐ No
	(2) Safety recognition emblem summary current?					☑ Yes	☐ No
	j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?				current?	√ Yes	☐ No
	(1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?					√ Yes	☐ No
		(2)	Copies maintained with IIPP file?			☑ Yes	☐ No
6.	INJURY AND ILLNESS PREVENTION PROGRAM  EVALUATED 3/13/2009					CORRECTED	
	a. Command specific IIPP on file?						☐ No
	(1) Is the program effective?					√ Yes	☐ No
	(2) Contains all required documents?				✓ Yes	☐ No	
	(3) Discussed with all employees?				√ Yes	☐ No	
	(4) All employees understand their roles and responsibilities?					☑ Yes	☐ No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program O	rientation and Review?	☑ Yes	☐ No
		(6)	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention I	Program Orientation	✓ Yes	☐ No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and docum	ented?	√ Yes	☐ No
		(8)	Is required documentation maintained according to policy?			☑ Yes	☐ No
7.	CC	MM	UNICATION WITH DOSH	3/14/2009	ACTION REQUIRED	CORRECTED	
	а.	Em	ployees aware of procedures regarding DOSH inspections?			√ Yes	☐ No
	b. Command's documents readily available for review by DOSH Compliance Officer?				☑ Yes	☐ No	
8.	HA	ZAR	RDOUS SUBSTANCE PROGRAM	3/12/2009	ACTION REQUIRED	CORRECTED	
6	a. Does command have a written Hazardous Substance Program for substances used within that command?			☑ Yes	☐ No		
	(1) Are hazardous substances identified and properly labeled?				☑ Yes	☐ No	
		(2)	Warning signs posted?			☑ Yes	☐ No
		(3)	Material Safety Data Sheets readily available?			☑ Yes	☐ No
		(4)	Employees receive training?			√ Yes	☐ No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

OCCUPATIONAL	SAFEI
CHP 453M (Rev. 5-06) (	OPI 009

D 2	(5)	Training documented?			☑ Yes	☐ No
	(6)	Employees informed of their right to applicable medical and	I exposure information?		☑ Yes	☐ No
9. F	IAZA	RDOUS EXPOSURE CONTROL PROGRAMS	3/20/2009	ACTION REQUIRED	CORRECTED	
а	. Ac	ctivities identified within command that may require exposure t	o hazardous conditions	?	√ Yes	☐ No
	(1)	Appropriate engineering and/or administrative controls impl	emented?		√ Yes	☐ No
	(2)	Protective equipment provided in accordance with bargaining	ng unit agreements?		√ Yes	☐ No
	(3)	Employees trained on use and maintenance of equipment?			√ Yes	☐ No
	(4)	Training documented?			☑ Yes	☐ No

# COMMAND INSPECTION PROGRAM FYCEPTIONS DOCUMENT

Faue 1 of 3

Command: Division: Chapter: 12
Inspected by: Date: Sgt. Robert R. Nevins / #13603

rage rors				
number of the inspection in the Chapter	Inspection	Check appropriate boxes as necessary, or on number. Under "Forward to:" enter the n ent shall be utilized to document innovative p action plans. A CHP 51 Memorandum may	DIACTICES, Suggestions to state wide	er
TYPE OF INSPECTION  Division Level Command Level		Total hours expended on the inspection:	☐ Corrective Action Plan Included ☐ Attachments Included	The second
Executive Office Level Follow-up Required:		rd to: Valley Division		4
☐ Yes   ☑ No Chapter inspection	Due D	ate: 05/19/2009		が変
occupational Safety Committee addressed or one problem that that is already resolved.	sentin n of pro ee is e t requi	g several Bargaining Units, are poblems that exist or are foreseen expected to bring with him/her at l	east one issue that needs to be blem might be a transient one or discussed amongst the	
Command Suggestions for S	tatewi	de Improvement:	00 11 7 25 2	7
None				
Inspector's Findings:				
departmental policy as outlined significant deficiencies were di	d in Hi iscove	ering to all occupational safety pr ghway Patrol Manual (HPM) 10. red, observed or alleged during t uarter Occupational Safety audit	6, Occupation Safety Manual. No this Command Inspection Program	ù.

Commander's Response: ⊠ Concur or ☐ Do Not Concur (Do Not Concur shall document basis for response)

STATE CF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL
COMMAND INSPECTION PROGRAM
EXCEPTIONS DOCUMENT

Oroville Area | Valley | Inspected by: | Sgt. Robert R. Nevins / #13603

Command:

Division: Valley Chapter:

Date: 05/13/2009

je 2 of 3

200 20020

nged.

Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

N/A

CHP

530 533 2703

P.04

P. (2)

STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL
COMMAND INSPECTION PROGRAM
EXCEPTIONS DOCUMENT

Command:	Division:	Chapter:	de e
Oroville Area	Valley	12	
Inspected by:	Nevins / #13603	Date: 05/13/2009	

ge 3 of 3

Required Action 2012 12 12 12 12 12 12 12 12 12 12 12 12 1	
Corrective Action Plan/Timeline	

N/A

Employee would like to discuss this report with the reviewer.	COMMANDER'S SIGNATURE POR	DATE 81510195/13/2009
(See HPM 9.1, Chapter 8 for appeal procedures.)	INSPECTOR'S SIGNATURE	DATE
Reviewer discussed this report with	REVIEWER'S SIGNATURE	05/13/2009 DATE //
employee  Concur  Do not concur	Affleto _	07/22/09

#### AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Oroville (240)	Valley	
EVALUATED BY		DATE
Sergeant Robert R. Nevins, #13603		04/20/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION  Formal Evaluation  Infor	mal Evaluation	SUSPENSE DATE 04/24/2009			
FOLLOW-UP REQUIRED	☐ Correction Report	COMMANDER'S REVIEW		DATE	
☑ Yes ☐ No	Conection Report				
	BY	EVALUATED	LOTION PEOUPES	04/23/20	
1. GOALS AND ACCOMPLISHME	ENTS	Yes	ACTION REQUIRED	CORRECTEI N/A	D
a. Is the command familiar with Safety Manual, Chapter 13?	the Occupational Safety Progra	m as outlined in HPM 10.	6, Occupational	✓ Yes	□No
(1) Are goals developed in a	accordance with departmental po	plicy?		✓ Yes	□ No
(2) Are environmental factor	s, exposure factors, and past ex	perience/trends consider	ed when setting goals?	✓ Yes	□No
(3) Are illness and non-serio	ous/non-traumatic injuries exclud	led from occupational safe	ety goals?	✓ Yes	□No
(4) Are goals appropriately o	categorized?			✓ Yes	□No
(5) Are goals realistic?				✓ Yes	□No
(6) Are goals consistent with	departmental objectives?			✓ Yes	□No
(7) Is input from all levels co	nsidered before goals are estab	lished?		✓ Yes	□No
b. Are goals being accomplished?				✓ Yes	□No
(1) Accurate reporting on CF	IP 113, Accident and Injury Rep	ort?		✓ Yes	□No
(2) Are accidents increasing	?			☐ Yes	☑ No
(3) Are injuries increasing?				☐ Yes	☑ No
(4) Why are they increasing/	decreasing? Occupational safet	ty goals, suggestions on it	njury/illness mitígation, t	rends, and	other accident
and injury topics and issu	tes are discussed regularly at A	rea training days, Area da	ily briefings, CHP 100 fo	orms and ot	her venues
such as range shoots and	supervisory ride-alongs (defens	sive driving skills and cor	nmentary driving).		
(5) Is CHP 113, Accident and	Injury Report, posted or readily	accessible?		✓ Yes	□No
(6) Are employees knowledg	eable about goals and achieven	nents?		✓ Yes	□No
(7) Are employees providing	suggestions toward goal attainn	nent?		✓ Yes	□No
2. PARTICIPATION		Yes	No REQUIRED	CORRECTED N/A	
a. Commander actively involved	in program?		***************************************	✓ Yes	□No
(1) Commander active in inju	(1) Commander active in injury/illness case management?				
(2) What is the commander's attitude regarding occupational safety? Lieutenant William Perlstein is conscientious about Oroville					Oroville
Area's Occupational Safety Program and the Department's Injury and Illness Prevention Program. He is a staunch proponent of					
mitigating injury and illu	mitigating injury and illness through frequent training and education and Area Occupational Safety Meetings.				

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

_						
	(3)	Occupational safety issues discussed at staff meetings and	training days?		✓ Yes	□No
	(4)	Are safety issues in the meeting minutes?			✓ Yes	□No
	(5)	Commander comments regarding safety issues in performa	ance evaluations?		✓ Yes	□No
	(6)	Does the commander ensure use of appropriate safety equ	ipment?		✓ Yes	□No
1	o. Ar	e managers/supervisors actively involved in the program?			✓ Yes	□No
	(1)	Are managers/supervisors involved in case management?			Yes	□No
	(2)	Do they have the appropriate attitude?			✓ Yes	□No
	(3)	Are managers monitoring supervisors' progress and efforts	to attain goals?		✓ Yes	□ No
	(4)	Are supervisors monitoring employees' efforts?			✓ Yes	□ No
	(5)	Do managers comment on safety issues in performance ev	aluations?		✓ Yes	□No
	(6)	Do supervisors comment on safety issues in performance e	valuations?		✓ Yes	□ No
	(7)	Do managers/supervisors ensure the use of proper safety e	quipment?		✓ Yes	☐ No
С	. Are	employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
	(1)	Are employees involved in their case management?			✓ Yes	□No
	(2)	Are employees knowledgeable about safety goals?			√ Yes	□No
1	(3)	Are they aware of the command's achievements?			✓ Yes	□No
	(4)	Are employees practicing safety while performing their dutie	s?		√ Yes	□No
	(5)	Are employees reporting unsafe conditions and/or work practical	ctices?		✓ Yes	□No
	(6)	Do employees work cooperatively to minimize hazards?			✓ Yes	□No
	(7)	Do employees offer suggestions to improve occupational sa	fety?		√ Yes	□No
	(8)	Is employee equipment properly used and maintained?			✓ Yes	□No
3. A	CCIDI	ENT AND INJURY TRENDS	Yes Yes	ACTION REQUIRED NO	CORRECTED N/A	
а.	Con	nmander's method of identifying trends? Licutenant William	Perlstein researches and	f reviews CHP 121's, 20	8's and 270	)'s regularly.
	He	consistently monitors injury and illness logs and monthly sc	hedules to identify trend	s, positive and negative.	He freque	ently speaks
	with	his elerical and supervisory staff members to determine if o	changes or alterations to	workplace practices, pro	ocedures or	habits are
	neco	essitated.				
	(1)	Are accidents and injuries being monitored to identify trends	?		✓ Yes	□No
		Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior mee		rt, OSHA 300,	✓ Yes	□No
	(3)	Are personnel in the command aware of current and potentia	al trends?		✓ Yes	□No
b.	Wha	t corrective action has the command taken when a trend has	been identified? Empl	oyees, both uniformed an	ıd non-unif	ormed, are
	routi	nely and regularly briefed regarding the causative factors dire	ectly responsible for or in	volved in illnesses, injur	ies, exposu	res, vehicle
	colli	sions/accidents, etc. Individual and group input, suggestions,	strategies and discussion	ns are strongly encourage	d for future	e prevention.

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Are commanders, managers, and supervisors actively imp	lementing correctiv	/e actions?	✓ Yes	□No
4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	Yes Yes	ACTION REQUIRED.	CORRECTE N/A	D
a. What is the composition of the COSC? Lieutenant Commando	er, Occupational Sa	fety Coordinator Sergeant, O	ffice Services	Supervisor I.
Special Duty Officer, Office Assistant, Field Officer, Automoti	ve Technician, Faci	ilities Custodian/Janitor. Eac	h of the Barg	aining Units is
represented in our COSC.				
(1) Is there representation from each collective bargaining uni	t?		√ Yes	□No
(2) Management and supervisory representation?			✓ Yes	□No
(3) Command Safety Coordinator assigned?			✓ Yes	□No
(4) Command Safety Coordinator active and effective?			✓ Yes	□No
(5) Are committee assignments rotated?			✓ Yes	□No
(6) COSC meetings held quarterly?			✓ Yes	□No
(7) Are meetings held more frequently when goals are not bein	ng attained?		✓ Yes	□No
(8) Do all committee members attend the meetings?			✓ Yes	☐ No
b. Are roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
(1) Do committee members understand their roles and respons	sibilities?		✓ Yes	□No
(2) Is an agenda prepared prior to the meeting?				□No
(3) Are departmental and Division Occupational Safety meeting	gs minutes readily a	available?	✓ Yes	□No
(4) Are these minutes utilized for Area meetings?				□No
(5) Are assignments given during Area meetings?			✓ Yes	□No
c. Minutes prepared for the COSC meeting?			✓ Yes	□No
(1) Recording secretary appointed?			✓ Yes	□No
(2) Minutes posted on command's Occupational Safety Board?			✓ Yes	□No
(3) Are minutes included in IIPP file?			✓ Yes	□No
(4) Minutes maintained current year, plus three?			✓ Yes	□No
(5) Minutes forwarded through channels?			✓ Yes	□No
d. Is the COSC effective?			✓ Yes	□No
(1) Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□No
(2) COSC proactive to eliminate potential causes of accidents a	ınd injuries?		✓ Yes	□No
(3) COSC disseminate current information and training regarding	g health and safety	y issues?	✓ Yes	□No
e. Do all personnel receive current information regarding health and	d safety?		✓ Yes	□No
f. Are outside agency safety programs utilized as a resource?			✓ Yes	□ No
g. Does the command maintain an effective health and safety comm	nunications system	1?	✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Potential hazards reported on CHP 113B, Hazard F		✓ Yes	□No	
(2) Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?				□No
(3) Do all members of the command participate in distr	ribution of safety and health int	ormation?	✓ Yes	□No
(4) COSC minutes posted in a timely manner?			✓ Yes	□No
(5) Required posters prominently displayed?			✓ Yes	□No
(6) COSC maintain the Command Occupational Safety	/ Bulletin Board?		✓ Yes	□ No
(7) Are responsibilities for the Occupational Safety Bull	letin Board contents assigned	to specific members?	☐ Yes	☑ No
5. DOCUMENTATION	CORRECTED	D		
STD 261s, Authorization to Use Privately Owned Vehicl filed in the employee's field folder?	es on State Business, comple	Yes ted annually and	☐ Yes	☑ No
<ul> <li>DMV INF 254, Government Agency Request for Driver I to request driver's license record check and filed in the</li> </ul>		nformation, utilized	☐ Yes	☑ No
c. OSHA 300, Log of Occupational Injury and Illnesses, uti	lized?		✓ Yes	□No
(1) Are required injuries and illnesses logged?			✓ Yes	□No
(2) Entries made within six working days of notification	✓ Yes	□No		
(3) Is lost-time and limited-duty documentation accurate	✓ Yes	☐ No		
(4) Retention according to policy?	✓ Yes	□No		
(5) Readily accessible for review by Cal-OSHA?	✓ Yes	□No		
(6) Previous calendar year log posted during February?	)		✓ Yes	□No
d. Are CHP 113s, Accident and Injury Report, compiled acc	curately?	-	✓ Yes	□No
(1) Commander review and sign?	✓ Yes	□No		
(2) CHP 113s and attachments processed in a timely m	anner?		✓ Yes	□No
e. Does the command utilize the CHP 113A, Safety Inspec	tion Checklist?		✓ Yes	□No
(1) Are semiannual safety inspections conducted?			✓ Yes	□No
(2) Are safety hazards identified?			✓ Yes	□No
(3) Is corrective action taken within 30 days?			✓ Yes	□No
(4) CHP 113A, Safety Inspection Checklist, maintained	✓ Yes	□No		
f. Are unsafe conditions identified and documented on CHP 113B, Hazard Report/Inspection?				□ No
(1) Measures taken to correct situation within 30 days?	✓ Yes	□No		
(2) Copy of CHP 113B, Hazard Report/Inspection, filed	✓ Yes	□No		
g. Are the CHP 121 series thoroughly and accurately complete	√ Yes	□No		
(1) Supervisory comments in-depth, clear, and concise?	√ Yes	□No		
(2) Commander signature on appropriate forms?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

-							
		(3)	Routed within time frames?			✓ Yes	□No
	h.	ls C		✓ Yes	□No		
.\		(1)		✓ Yes	□No		
	(2) Commander review?						□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□No
	i. A	Are i	njuries and accidents documented on CHP 442, Individual A	ccident, Injury and Safet	y Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, current?		✓ Yes	□No
		(2)	Safety recognition emblem summary current?			✓ Yes	□No
	j. A	Are C	CHP 712As, Injury and Illness Prevention Program Orientatio	on and Review, kept curr	ent?	✓ Yes	□No
	(	(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Action Pla	an Review?	✓ Yes	□No
	(	(2)	Copies maintained with IIPP file?			✓ Yes	□No
6.	INJ	URY	AND ILLNESS PREVENTION PROGRAM	Yes Yes	ACTION REQUIRED Yes	CORRECTED Yes	
	а. (	Com	mand specific IIPP on file?			✓ Yes	□No
_	(1) Is the program effective?						□No
	(2) Contains all required documents?						☑ No
	(3) Discussed with all employees?						□No
	(-	4) /	All employees understand their roles and responsibilities?		<del></del>	✓ Yes	□No
	( !	5) E	Each employee completed CHP 712A, Injury and Illness Pre	vention Program Orienta	tion and Review?	✓ Yes	□No
	(6	6) <b>N</b>	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention Progr	am Orientation	✓ Yes	□No
	(7	7) <i>F</i>	Are unsafe hazards or conditions identified, investigated, cor	rected, and documented	?	√ Yes	□No
	3)	8) Is	s required documentation maintained according to policy?			√ Yes	□No
7.	CON	MU	NICATION WITH DOSH	EVALUATED Yes	ACTION REQUIRED Yes	Yes	
	a. E	Emple	byees aware of procedures regarding DOSH inspections?			Yes	✓ No
	b. Command's documents readily available for review by DOSH Compliance Officer?					Yes	☑ No
В.	HAZARDOUS SUBSTANCE PROGRAM Yes ACTION REQUIRED NO						
	a. Does command have a written Hazardous Substance Program for substances used within that command?					✓ Yes	□No
	(1) Are hazardous substances identified and properly labeled?					✓ Yes	□No
	(2) Warning signs posted?					✓ Yes	□No
	(3	3) M	laterial Safety Data Sheets readily available?			✓ Yes	□No
	(4	) E	mployees receive training?			✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(5)	Training documented?			✓ Yes	□No
	(6)	Employees informed of their right to applicable medica	l and exposure informa	ition?		□No
9. H	AZAI	RDOUS EXPOSURE CONTROL PROGRAMS	Yes Yes	ACTION REQUIRED No	CORRECTED N/A	
a.	Act	tivities identified within command that may require expos	ure to hazardous cond	itions?	✓ Yes	☐ No
(1) Appropriate engineering and/or administrative controls implemented?				✓ Yes	□No	
	(2) Protective equipment provided in accordance with bargaining unit agreements?					□No
	(3) Employees trained on use and maintenance of equipment?					□No
	(4)	Training documented?			✓ Yes	□No

# COMMAND INSPECTION PROGRAM \*XCEPTIONS DOCUMENT

Command:	Division:	Chapter:
North Sacramento	Valley	12
Inspected by:		Date:
Sgt. Diego Flores, #12483		4/7/2009

Page	1	of	4
------	---	----	---

	Inspection docume	on number. Under "Forw ent shall be utilized to do	vard to:" enter the nex cument innovative pr	
TYPE OF INSPECTION  Division Level Command L  Executive Office Level	₋evel	Total hours expende inspection:	d on the	<ul><li>☑ Corrective Action Plan Included</li><li>☐ Attachments Included</li></ul>
Follow-up Required: ☑ Yes ☐ No		rd to: Division ate: April 15, 2009		
Chapter Inspection:	JAN STEELING			
Inspector's Comments Regar				
Inspector's Findings:				
Discrepancies were noted Documentation, and the A the COSC, with the excep	Area's otion of quires	Injury and Illness F f an IIPP revision, v a thorough revision	Prevention Progr were immediate In to the Area's I	Safety Committee (COSC), ram (IIPP). All items related to ly corrected. The primary njury and Illness Prevention
Commander's Response: 🖂	Concu	r or 🗌 Do Not Con	cur (Do Not Conci	ur shall document basis for response)

OF STATE PARTY.

# COMMAND INSPECTION PROGRAM \*\*XCEPTIONS DOCUMENT

Page 2 of 4

Command:	Division:	Chapter:
		10
North Sacramento	Valley	12
Inspected by:		Date:
Sgt. Diego Flores, #12483		4/7/2009

Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

### COMMAND INSPECTION PROGRAM

XCEPTIONS DOCUMENT

Page 3 of 4

Command:	Division:	Chapter:	
North Sacramento	Valley	12	
Inspected by:		Date:	
Sgt. Diego Flores, #12483		4/7/2009	

A RESIDENCE DE LA COMPANION DE COMPANION RESIDENCE DE LA COMPANION DE LA COMPA	V Maria
Required Action	
	200
Corrective Action Plan/Timeline	

#### Section 4: Command Occupational Safety Committee (COSC)

Item 4.c.(2) COSC meeting minutes were not posted at the Area.

Corrective Action: Minutes for the latest COSC meeting were posted on the Area's Occupational Safety bulletin board. The Occupational Safety sergeant will ensure minutes are kept and promptly posted in the future.

√ Item 4.c.(3) The Area's Injury and Illness Prevention Program (IIPP) manual has not been updated since 2002.

Corrective Action: The Area has begun a complete revision of its IIPP with an expected completion date of July 1, 2009.

Item 4.c.(4) The Area does not have COSC meeting minutes for the past three years.

Corrective Action: Minutes of the most recent COSC meeting have been filed and will continue to be filed henceforth.

Item 4.g.(6) The Area's Occupational Safety Board's posted goals and statistics were outdated. No COSC minutes were posted.

Corrective Action: The Area's goals for 2009 and the latest COSC minutes were posted. The quarterly/year-to-date statistics were updated.

### Section 5: Documentation

√ Item 5.e.(4) The Area's IIPP manual is outdated and requires updating with copies of the applicable CHP 113A.

Corrective Action: The Area's IIPP manual is under revision.

# COMMAND INSPECTION PROGRAM XCEPTIONS DOCUMENT

Page 4 of 4

Command:	Division:	Chapter:
North Sacramento	Valley	12
Inspected by:	***************************************	Date:
Sgt. Diego Flores, #12483		4/7/2009

### Section 6: Injury and Illness Prevention Program (IIPP)

✓ Item 6.a.(2) The Area's IIPP is outdated and requires updating with copies of all applicable required documents.

Corrective Action: The Area's IIPP manual is under revision.

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE	5/18/09
	(t. D. Rine Fox SGT. D. FLORES	DATE / .5/18/09
Reviewer discussed this report with remployee Do not concur	REVIEWER'S SIGNATURE	8/27/29

#### AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

\* IP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
North Sacramento	Valley	
EVALUATED BY		DATE
		04/03/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired

	al Evaluation 📝 Info	mal Evaluation	SUSPENSE DATE			
FOLLOW-UP  Yes	REQUIRED No	☐ Correction Report	COMMANDER'S REVIEW		DATE	
1. GOAL	S AND ACCOMPLISHM	ENTS	04/03/2009			ED .
a. Is i Sa	the command familiar with fety Manual, Chapter 13?	the Occupational Safety Progr	ram as outlined in HPM 1	0.6, Occupational	✓ Yes	□No
(1)	Are goals developed in	accordance with departmental	policy?		✓ Yes	□ No
(2)	Are environmental facto	rs, exposure factors, and past e	experience/trends conside	ered when setting goals?	✓ Yes	□No
(3)		ous/non-traumatic injuries exclu			✓ Yes	□No
(4)	(4) Are goals appropriately categorized?					 □ No
(5)	(5) Are goals realistic?				☑ Yes	 □ No
(6)	Are goals consistent with	n departmental objectives?			✓ Yes	□ No
(7)	Is input from all levels co	onsidered before goals are esta	blished?		✓ Yes	□No
b. Are	b. Are goals being accomplished?				✓ Yes	□No
(1)	Accurate reporting on CHP 113, Accident and Injury Report?				✓ Yes	□No
(2)	Are accidents increasing	?			☐ Yes	☑ No
(3)	Are injuries increasing?				☐Yes	☑ No
(4)	Why are they increasing/	decreasing? Proactive Comm	and Occupational Safety	Committee (COSC).		
(5)	ls CHP 113, Accident and	d Injury Report, posted or readi	ily accessible?		☑ Yes	□No
(6)	Are employees knowledg	eable about goals and achieve	ments?		✓ Yes	□No
(7)	Are employees providing	suggestions toward goal attain	ment?		✓ Yes	□No
. PARTIC	EIPATION		04/03/2009	ACTION REQUIRED No	CORRECTED	)
a. Com	mmander actively involved in program?				☑ Yes	□No
(1)	Commander active in inju	ry/illness case management?			✓ Yes	□No
(2)	What is the commander's	attitude regarding occupationa	Il safety? The Area com	mander and management to	eam suppor	t and
	proactively promote occu	pational safety for all employe	ees at all levels.			

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(3) Occupational safety issues d	liscussed at staff meetings and	d training days?		✓ Yes	□No
	(4) Are safety issues in the mee	ting minutes?			✓ Yes	□No
	(5) Commander comments rega	rding safety issues in performa	ance evaluations?		✓ Yes	□No
	(6) Does the commander ensure	use of appropriate safety equ	uipment?		✓ Yes	□No
	b. Are managers/supervisors active	y involved in the program?			✓ Yes	□No
	(1) Are managers/supervisors in	volved in case management?			✓ Yes	□No
	(2) Do they have the appropriate	attitude?			✓ Yes	□No
_	(3) Are managers monitoring sup	pervisors' progress and efforts	to attain goals?		✓ Yes	□No
	(4) Are supervisors monitoring e	mployees' efforts?			✓ Yes	□No
	(5) Do managers comment on sa	afety issues in performance ev	aluations?	( <b></b> )	✓ Yes	□No
	(6) Do supervisors comment on s	safety issues in performance e	evaluations?		✓ Yes	□No
	(7) Do managers/supervisors en	sure the use of proper safety e	equipment?		✓ Yes	□No
	c. Are employees actively involved in	ո the Occupational Safety Pro	gram?		✓ Yes	□No
_	(1) Are employees involved in the	eir case management?	7.1		✓ Yes	□No
	(2) Are employees knowledgeable about safety goals?					□No
	(3) Are they aware of the command's achievements?				✓ Yes	□No
	(4) Are employees practicing safe	(4) Are employees practicing safety while performing their duties?				□No
	(5) Are employees reporting unsa	(5) Are employees reporting unsafe conditions and/or work practices?				□No
	(6) Do employees work cooperati	vely to minimize hazards?			✓ Yes	□No
	(7) Do employees offer suggestio	ns to improve occupational sa	ifety?		✓ Yes	□No
	(8) Is employee equipment proper	rly used and maintained?			✓ Yes	□No
3.	3. ACCIDENT AND INJURY TRENDS		04/03/2009	ACTION REQUIRED No	CORRECTED	
	a. Commander's method of identifying	g trends? The Area command		g trends related to accid-	ents and/or	r injuries by
	collaborating with COSC member					
	documentation, and remedial train	ing.				
	(1) Are accidents and injuries being	g monitored to identify trends	?		✓ Yes	□No
	(2) Is the Occupational Safety Cor Log of Occupational Injuries an	mmittee reviewing CHP 113, And Illnesses, entries, prior mee	Accident and Injury Repo	rt, OSHA 300,	✓ Yes	□No
	(3) Are personnel in the command	aware of current and potentia	al trends?		✓ Yes	□No
	b. What corrective action has the com	mand taken when a trend has	s been identified? Imme	diate intervention (i.e., c	orrection),	briefing and
	training.					

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

(	Are commanders, managers, and supervisors actively imp		actions?	✓ Yes	□No
4. COM	MMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	04/03/2009	ACTION REQUIRED Yes	CORRECTE	D
a. \	What is the composition of the COSC? Representatives from e	ach bargaining unit a	nd all levels of the chain of	of command.	
(	1) Is there representation from each collective bargaining unit	?		✓ Yes	☐ No
(2	2) Management and supervisory representation?			✓ Yes	□No
(3	Command Safety Coordinator assigned?			✓ Yes	□No
(4	1) Command Safety Coordinator active and effective?			✓ Yes	□No
(5	5) Are committee assignments rotated?			✓ Yes	□No
(6	6) COSC meetings held quarterly?			✓ Yes	□No
(7	<ul> <li>Are meetings held more frequently when goals are not bein</li> </ul>	g attained?		☐ Yes	☑ No
(8	Do all committee members attend the meetings?			✓ Yes	□No
b. A	re roles and responsibilities defined in accordance with IIPP?			✓ Yes	□No
(1	) Do committee members understand their roles and respons	ibilities?		✓ Yes	□No
(2	) Is an agenda prepared prior to the meeting?			✓ Yes	□No
(3)	) Are departmental and Division Occupational Safety meeting	s minutes readily av	ailable?	✓ Yes	□No
(4)	Are these minutes utilized for Area meetings?			☑ Yes	□No
(5)	Are assignments given during Area meetings?			✓ Yes	□No
c. Mi	nutes prepared for the COSC meeting?			✓ Yes	□No
(1)	Recording secretary appointed?			✓ Yes	□No
(2)	Minutes posted on command's Occupational Safety Board?			☐ Yes	☑ No
(3)	Are minutes included in IIPP file?			☐ Yes	☑ No
(4)	Minutes maintained current year, plus three?			☐ Yes	☑ No
(5)	Minutes forwarded through channels?			✓ Yes	□No
d. Is t	the COSC effective?			✓ Yes	□No
(1)	Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□No
(2)	COSC proactive to eliminate potential causes of accidents a	nd injuries?		✓ Yes	□No
(3)	COSC disseminate current information and training regarding	g health and safety is	ssues?	✓ Yes	□No
e. Do	all personnel receive current information regarding health and	I safety?		✓ Yes	□No
f. Are	outside agency safety programs utilized as a resource?			✓ Yes	□No
g. Doe	es the command maintain an effective health and safety comm	nunications system?		✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

- 3					
	(1) Potential hazards reported on CHP 113B, Hazard Report	t/Inspection?		✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, repo	ort disseminated according	to policy?	✓ Yes	□No
	(3) Do all members of the command participate in distribution	n of safety and health info	rmation?	✓ Yes	☐ No
	(4) COSC minutes posted in a timely manner?	✓ Yes	□No		
	(5) Required posters prominently displayed?			✓ Yes	□No
	(6) COSC maintain the Command Occupational Safety Bulle	etin Board?		☐ Yes	✓ No
	(7) Are responsibilities for the Occupational Safety Bulletin B	Board contents assigned to	specific members?	✓ Yes	☐ No
5.	DOCUMENTATION	04/03/2009	ACTION REQUIRED Yes	CORRECTE	D
	a. STD 261s, Authorization to Use Privately Owned Vehicles on filed in the employee's field folder?	State Business, complete	d annually and	✓ Yes	□No
	<ul> <li>DMV INF 254, Government Agency Request for Driver Licens to request driver's license record check and filed in the employ</li> </ul>	se/Identification Record In yee's field folder?	formation, utilized	□Yes	☑ No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No
	(1) Are required injuries and illnesses logged?			✓ Yes	□No
_	(2) Entries made within six working days of notification of an	employee injury or illness	?	✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□ No
	(4) Retention according to policy?			✓ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6) Previous calendar year log posted during February?			✓ Yes           Yes         ✓ Yes           Yes         ✓ Yes           Yes         ✓ Yes         ✓ Yes         ✓ Yes         ✓ Yes          Yes         ✓ Yes         ✓ Yes          ✓ Yes         ✓ Y	□No
	d. Are CHP 113s, Accident and Injury Report, compiled accurate	ly?	_	✓ Yes	□No
	(1) Commander review and sign?			✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner	?		✓ Yes	□No
6	e. Does the command utilize the CHP 113A, Safety Inspection Cl	hecklist?		✓ Yes	□No
	(1) Are semiannual safety inspections conducted?			✓ Yes	□No
	(2) Are safety hazards identified?			✓ Yes	□No
	(3) Is corrective action taken within 30 days?			✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with II	PP and retained according	g to policy?	☐Yes	☑ No
f.	Are unsafe conditions identified and documented on CHP 113B	3, Hazard Report/Inspection	n?	✓ Yes	□No
	(1) Measures taken to correct situation within 30 days?			✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or atta	ached to IIPP?		✓ Yes	□No
g	Are the CHP 121 series thoroughly and accurately completed?			✓ Yes	□No
L	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
	(2) Commander signature on appropriate forms?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

#### **OCCUPATIONAL SAFETY**

_		(3)	Routed within time frames?			✓ Yes	□No
	h.	ls	CHP 208, Accident Prevention Report, thoroughly and accura	itely completed?		✓ Yes	□No
		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
		(2)	Commander review?			✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□No
	i. <i>F</i>	Are	injuries and accidents documented on CHP 442, Individual A	ccident, Injury and Safet	y Recognition Record?	✓ Yes	□No
		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, current?		✓ Yes	□No
		(2)	Safety recognition emblem summary current?			✓ Yes	□No
	j. A	Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?				✓ Yes	□No
_	(	(1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?				✓ Yes	□No
	(	(2) Copies maintained with IIPP file?				☐ Yes	☑ No
6.	INJ	UR	Y AND ILLNESS PREVENTION PROGRAM	04/03/2009	Yes	CORRECTED	
	а. (	Cor	mmand specific IIPP on file?			✓ Yes	□No
	(	(1) Is the program effective?					□No
	(	(2)	Contains all required documents?			☐Yes	☑ No
	(:	(3)	Discussed with all employees?			✓ Yes	□No
	(4	4)	All employees understand their roles and responsibilities?			✓ Yes	□ No
	(!	5)	Each employee completed CHP 712A, Injury and Illness Pre	vention Program Orienta	ation and Review?	✓ Yes	□No
		6)	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention Progr	am Orientation	✓ Yes	□No
	(7	7)	Are unsafe hazards or conditions identified, investigated, cor	rected, and documented	?	✓ Yes	□No
	3)	8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	COM	MI	UNICATION WITH DOSH	04/03/2009	ACTION REQUIRED No	CORRECTED	
	a. E	mp	ployees aware of procedures regarding DOSH inspections?			☑ Yes	□No
	b. C	om	nmand's documents readily available for review by DOSH Cor	mpliance Officer?		Yes	□No
3.	HAZ	AR	DOUS SUBSTANCE PROGRAM	04/03/2009	ACTION REQUIRED NO	CORRECTED	
	a. D	oe:	s command have a written Hazardous Substance Program fo	r substances used within	that command?	✓ Yes	□No
	(1	l) .	Are hazardous substances identified and properly labeled?			✓ Yes	□No
	(2	?) '	Warning signs posted?			✓ Yes	□No
	(3	3) 1	Material Safety Data Sheets readily available?			✓ Yes	□No
	(4)	i)	Employees receive training?			✓ Yes	□No
						-	

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

<sup>1</sup>P 453M (Rev. 5-06) OPI 009

(5)	) Training documented?			✓ Yes	☐ No
(6)	) Employees informed of their right to applicable medic	al and exposure informati	on?	✓ Yes	□No
. HAZA	ARDOUS EXPOSURE CONTROL PROGRAMS	04/03/2009	ACTION REQUIRED No	CORRECTED	)
a. Ac	ctivities identified within command that may require expo	osure to hazardous conditi	ons?	✓ Yes	□No
(1)	) Appropriate engineering and/or administrative control	s implemented?		✓ Yes	□ No
(2)	) Protective equipment provided in accordance with ba	rgaining unit agreements?	·	✓ Yes	□ No
(3)	) Employees trained on use and maintenance of equip	ment?		✓ Yes	□No
(4)	Training documented?			✓ Yes	☐ No

# COMMAND INSPECTION PROGRAM FXCEPTIONS DOCUMENT

Command:	Division:	Chapter:	
Grass Valley	Valley	12	
Inspected by:	-1,	Date: 3-10-09	
M. Whiting, 128	3-10-09		

rage 1 of 2

	Inspection docume	on number. Under "Forw ent shall be utilized to doc	ard to:" enter the nex cument innovative pra			
TYPE OF INSPECTION  ☐ Division Level ☐ Command Level ☐ Executive Office Level		Total hours expended on the inspection:		☐ Corrective Action Plan Included ☐ Attachments Included		
Follow-up Required: Forwa  ☐ Yes ☑ No Due D		rd to: Valley Division ate:				
Chapter Inspection:  Inspector's Comments Regarding Innovative Practices:  General safety practices are standard and in line with departmental policy.						
Command Suggestions for Statewide Improvement:						
Inspector's Findings:						
Overall, Area personnel are conducting their work activities in a safe manner.  Commander's Response:  Concur or  Do Not Concur (Do Not Concur shall document basis for response)						

Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)

Sultry F - 2 12

# **COMMAND INSPECTION PROGRAM** "XCEPTIONS DOCUMENT

rage 2 of 2

Command:	Division:	Chapter:	
Grass Valley	Valley	12	
Inspected by:		Date:	
M. Whiting, 128	388	3-10-09	

Required Action	
Corrective Action Plan/Timeline	

Employee would like to discuss this report with	COMMANDER'S SIGNATURE	DATE
the reviewer. (See HPM 9.1, Chapter 8 for appeal procedures.)	criulto	Sister
(See Til Ni 9.1, Chapter o for appear procedures.)	INSPECTOR'S SIGNATURE	DATE
	Tration J. T	5-21-09
Reviewer discussed this report with	REVIEWER'S SIGNATURE	DATE / /
employee  Concur  Do not concur	1 4410 to	07/4/09

### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

20.0	DIVISION	P. Company
GRASS VALLEY	WALLE.	NUMBER
ALCOATED BY	VALLEY	230
h 1.//1		DATE
M. WHITIMO	12fft	1 2 2 2 2
e "Evaluated" box	20.0	3/10/09

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information Can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired. TYPE OF EVALUATION

	Informal Evaluation	ement can be handwritten if desired.	biessions
☐ Yes ☑ No	☐ Correction Report	COMMANDER'S REVIEW	
1. GOALS AND ACCOMPLIS	BY		DATE
a. Is the command familiar Safety Manual, Chapter	with the Occupational Safety D	evaluated whether action reco	3/16/05 CORRECTED
(1) Are goals down	137 Sulety Pro	gram as outlined in HPM 10.6. Occupation	
(2) Are and	in accordance with departmental	l pelli e	ial
(3) A environmental fac	otors, exposure factors, and	policy? experience/trends considered when setting	¥ Yes □ N
(5) Are illness and non-se	Prious/non-traumetics	experience/trends considered when a considered	⊠ Yes □ No
(4) Are goals appropriately	V Categorius	experience/trends considered when setting uded from occupational safety goals?	g goals? ☑ Yes ☐ No
(5) Are goals realistic?	outegorized?	salety goals?	⊠ Yes □ No
(6) Are goals consists			
(6) Are goals consistent wit	h departmental objectives?		LJ.:
an levels co	noid		☑ Yes □ No
b. Are goals being accomplished	d?	ished?	⊠ Yes □ No
(1) Accurate reporting on Ch	IP 113, Accident and Injury Repor		⊠ Yes □ No
	Report and Injury Report	rt?	⊠ Yes □ No
(3) Are injuries increasing?			⊠ Yes □ No
(4) Why are they increasing/de			F71
-y increasing/de	creasing?		E71
	70 A	TTACHED NARRATIVE.	⊠Yes □ No
(5) Is CHP 113, Accident and Inj			
(6) Are employees to	ury Report, posted or readily acc	Modelle III.	
(6) Are employees knowledgeab  (7) Are employees providing suggestions.	le about goals and achieve	essible?	
(7) Are employees providing sugg	Jestions toward goal	?	Yes 🗌 No
			☑ Yes ☐ No
Commander actively involved in pro	EV	ALUATED ACTION REQUIRED	⊠ Yes □ No
(1) Commander active in it	gram?	- Sances	ORRECTED
Commander active in injury/illne     What is the commander.	ess case management?		NV-
attitud	e regarding occupational		⊠ Yes □ No
ENCOURAGES THE !	A MASA CO.	THE COMPA	Yes No
Rev. 5-06) Page 1 of 6			T West 1
	Destroy Previous Ed		

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

(3	Occupational safety issues discussed at staff meetings and training days?	☑ Yes	□No
(4	Are safety issues in the meeting minutes?	⊠ Yes	□No
(5	Commander comments regarding safety issues in performance evaluations?	☑ Yes	□No
(6	Does the commander ensure use of appropriate safety equipment?	<b></b> Yes	□No
b. Aı	e managers/supervisors actively involved in the program?	⊠ Yes	□No
(1)	Are managers/supervisors involved in case management?	⊠ Yes	□No
(2)	Do they have the appropriate attitude?	⊠ Yes	□No
(3)	Are managers monitoring supervisors' progress and efforts to attain goals?	⊠ Yes	□No
(4)	Are supervisors monitoring employees' efforts?	⊠ Yes	□No
(5)	Do managers comment on safety issues in performance evaluations?	<b>⊠</b> Yes	□No
(6)	Do supervisors comment on safety issues in performance evaluations?	Yes	□No
(7)	Do managers/supervisors ensure the use of proper safety equipment?	✓ Yes	□ No
c. Are	e employees actively involved in the Occupational Safety Program?	✓ Yes	□No
(1)	Are employees involved in their case management?	<b>⊠</b> Yes	□No
(2)	Are employees knowledgeable about safety goals?	⊠ Yes	□No
(3)	Are they aware of the command's achievements?	▼ Yes	□No
(4)	Are employees practicing safety while performing their duties?	⊠ Yes	□ No
(5)	Are employees reporting unsafe conditions and/or work practices?	🛚 Yes	□No
(6)	Do employees work cooperatively to minimize hazards?	⊠ Yes	□ No
(7)	Do employees offer suggestions to improve occupational safety?	Yes Yes	□No
(8)	Is employee equipment properly used and maintained?	▼ Yes	□No
3. ACCID	ENT AND INJURY TRENDS  EVALUATED  ACTION REQUIRED	CORRECTED	
a. Cor	nmander's method of identifying trends? REFER TO ATTACHED MAREATIVE		
(1)	Are accidents and injuries being monitored to identify trends?	Yes	□No
(2)	ls the Occupational Safety Committee reviewing CHP 113, Accident and Injury Report, OSHA 300, Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	ĭ Yes	□No
(3)	Are personnel in the command aware of current and potential trends?	Yes	□No
b. Wha	t corrective action has the command taken when a trend has been identified?		

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1)	Are commanders, managers, and supervisors actively imp			▼ Yes	□No
4. C	OM	MAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	EVALUATED	ACTION REQUIRED	CORRECTED	)
a.	. W	hat is the composition of the COSC? REFER TO A-	TACHED N	ARRATIVE.	'	
	(1)	Is there representation from each collective bargaining unit	?		¥ Yes	□ No
	(2)	Management and supervisory representation?			<b>∀</b> Yes	□No
	(3)	Command Safety Coordinator assigned?			<b>⊠</b> Yes	☐ No
	(4)	Command Safety Coordinator active and effective?			<b>∠</b> Yes	□ No
	(5)	Are committee assignments rotated?			⊠ Yes	□ No
	(6)	COSC meetings held quarterly?			<b>⊠</b> Yes	□No
	(7)	Are meetings held more frequently when goals are not being	g attained?	NA	☐ Yes	<b>⊠</b> No
	(8)	Do all committee members attend the meetings?			¥ Yes	□No
b.	Are	e roles and responsibilities defined in accordance with IIPP?			¥ Yes	□No
	(1)	Do committee members understand their roles and respons	sibilities?		<b>⊠</b> Yes	□No
	(2)	Is an agenda prepared prior to the meeting?			✓ Yes	□No
	(3)	Are departmental and Division Occupational Safety meeting	gs minutes readily a	ıvailable?	<b>⊠</b> Yes	□No
	(4)	Are these minutes utilized for Area meetings?			Yes  Yes	□No
	(5)	Are assignments given during Area meetings?			<b>⊠</b> Yes	□No
C.	Min	utes prepared for the COSC meeting?			<b>⊠</b> Yes	□No
	(1)	Recording secretary appointed?			☐ Yes	⊠ No
	(2)	Minutes posted on command's Occupational Safety Board?			<b>y</b> Yes	□ No
	(3)	Are minutes included in IIPP file?			Yes	□No
	(4)	Minutes maintained current year, plus three?			Yes  Yes	□No
	(5)	Minutes forwarded through channels?			☑ Yes	□No
d.	Is th	e COSC effective?			⊠ Yes	□No
	(1)	Are COSC recommendations clear, concise and pertinent to	the command?		✓ Yes	□ No
	(2)	COSC proactive to eliminate potential causes of accidents a	nd injuries?		⊠ Yes	□No
	(3)	COSC disseminate current information and training regardin	g health and safety	issues?	✓ Yes	□No
e.	Do a	ll personnel receive current information regarding health and	d safety?		✓ Yes	□ No
f. A	Аге о	utside agency safety programs utilized as a resource?			<b>⊻</b> Yes	□No
g.	Does	s the command maintain an effective health and safety comr	nunications system	?	⊠ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

ì	(1)	Potential hazards reported on CHP 113B, Hazard Report/Ins	spection?		☑ Yes	□No
	(2)	Are findings of the 113B, Hazard Report/Inspection, report of	disseminated according to	o policy?	⊠ Yes	□No
	(3)	Do all members of the command participate in distribution of	f safety and health inforn	nation?	✓¥Yes	□No
	(4)	COSC minutes posted in a timely manner?	<b>⊠</b> Yes	□No		
	(5) Required posters prominently displayed?					□No
	(6)	COSC maintain the Command Occupational Safety Bulletin	Board?		✓ Yes	□No
	(7)	Are responsibilities for the Occupational Safety Bulletin Board	rd contents assigned to s	specific members?	☑ Yes	□No
5.	DOCU	MENTATION	EVALUATED	ACTION REQUIRED	CORRECTEL	)
		D 261s, Authorization to Use Privately Owned Vehicles on Sta d in the employee's field folder?	ate Business, completed	annually and	⊠ Yes	□No
	b. DM to r	V INF 254, Government Agency Request for Driver License/lo equest driver's license record check and filed in the employee	dentification Record Info	rmation, utilized	⊠ Yes	□No
	c. OS	HA 300, Log of Occupational Injury and Illnesses, utilized?			⊠ Yes	□No
_	(1)	Are required injuries and illnesses logged?			🔀 Yes	□No
_	(2)	Entries made within six working days of notification of an em	ployee injury or illness?		✓ Yes	□No
	(3)	Is lost-time and limited-duty documentation accurate?			⊠ Yes	□No
	(4)	Retention according to policy?			⊠ Yes	□No
	(5)	Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6)	Previous calendar year log posted during February?			🔀 Yes	□No
	d. Are	CHP 113s, Accident and Injury Report, compiled accurately?			☑ Yes	□No
	(1)	Commander review and sign?			⊠ Yes	□No
	(2)	CHP 113s and attachments processed in a timely manner?			<b>⊠</b> Yes	□No
-	e. Doe	s the command utilize the CHP 113A, Safety Inspection Chec	cklist?		⊠ Yes	□No
	(1)	Are semiannual safety inspections conducted?			⊠ Yes	□No
	(2)	Are safety hazards identified?			Yes  Yes	□No
	(3)	ls corrective action taken within 30 days?			⊠ Yes	□No
	(4)	CHP 113A, Safety Inspection Checklist, maintained with IIPP	and retained according	to policy?	✓ Yes	□No
f	Are u	nsafe conditions identified and documented on CHP 113B, H	azard Report/Inspection	?	⊠ Yes	□No
	(1) I	Measures taken to correct situation within 30 days?			✓ Yes	□No
	(2) (	Copy of CHP 113B, Hazard Report/Inspection, filed or attache	ed to IIPP?		Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye	□No
9	. Are t	he CHP 121 series thoroughly and accurately completed?			⊠ Yes	□No
	(1) 8	Supervisory comments in-depth, clear, and concise?			⊠ Yes	□No
	(2)	Commander signature on appropriate forms?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

_									
ī		(3)	Routed within time frames?			<b>⊠</b> Yes	□No		
	h.	ls	CHP 208, Accident Prevention Report, thoroughly and accura	tely completed?		⊠ Yes	□ No		
		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□ No		
		(2)	Commander review?			⊠Yes	□ No		
		(3)	Commander signs appropriate form?	ander signs appropriate form?					
		(4)	Properly routed within time limits?			☑ Yes	□No		
	i.	Are	injuries and accidents documented on CHP 442, Individual A	ccident, Injury and Sat	ety Recognition Record?	<b>∀</b> Yes	□No		
Ξ		(1)	Are CHP 442s, Individual Accident, Injury and Safety Recog	nition Record, current	?	✓ Yes	□No		
		(2)	Safety recognition emblem summary current?		72.5	☑ Yes	□No		
	j.	j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?					□No		
	(1) Is specific safety training documented on CHP 712, Employee Emergency Action Plan Review?					⊠ Yes	□ No		
	(2) Copies maintained with IIPP file?						□ No		
6.	IN.	JUR	Y AND ILLNESS PREVENTION PROGRAM	EVALUATED	ACTION REQUIRED	CORRECTED			
	a.	Co	mmand specific IIPP on file?			✓ Yes	□No		
		(1)	Is the program effective?			<b>∑</b> Yes	□ No		
		(2)	Contains all required documents?			⊠ Yes	☐ No		
		(3)	Discussed with all employees?			✓ Yes	□ No		
		(4)	All employees understand their roles and responsibilities?			⊠ Yes	□No		
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	vention Program Orie	ntation and Review?	⊠ Yes	□No		
		(6)	New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention Pro	gram Orientation	⊮ Yes	□No		
		(7)	Are unsafe hazards or conditions identified, investigated, con	rected, and document	ed?	⊠ Yes	□No		
		(8)	Is required documentation maintained according to policy?			⊠ Yes	☐ No		
7.	co	ММ	UNICATION WITH DOSH	EVALUATED	ACTION REQUIRED	CORRECTED			
	a.	Emp	ployees aware of procedures regarding DOSH inspections?			Yes	□No		
	b.	Con	nmand's documents readily available for review by DOSH Co			⊠ Yes	□No		
В.	HA	ZAR	RDOUS SUBSTANCE PROGRAM	EVALUATED	ACTION REQUIRED	CORRECTED			
	a.	Doe	es command have a written Hazardous Substance Program fo	or substances used wit	hin that command?	✓ Yes	□No		
	(	(1)	Are hazardous substances identified and properly labeled?			Yes	□No		
	(	(2)	Warning signs posted?			☑ Yes	□No		
	(	(3)	Material Safety Data Sheets readily available?			⊠ Yes	□No		
	(	(4)	Employees receive training?			⊠ Yes	□No		
Г									

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

ļ.	(5) T	raining documented?			⊠ Yes	□No
	(6) E	imployees informed of their right to applicable medical	al and exposure informa	tion?	✓ Yes	□ No
9. H	AZARD	OUS EXPOSURE CONTROL PROGRAMS	EVALUATED	ACTION REQUIRED	CORRECTED	)
a.	Activit	ties identified within command that may require expo	sure to hazardous cond	itions?	✓ Yes	□No
	(1) A <sub>l</sub>	ppropriate engineering and/or administrative controls	s implemented?		⊠ Yes	□No
	(2) Pi	rotective equipment provided in accordance with bar	rgaining unit agreements	s?	⊠ Yes	□No
	(3) Er	mployees trained on use and maintenance of equipn	nent?		⊠ Yes	□No
	(4) Tr	raining documented?			⊠ Yes	☐ No

#### CHAPTER 12 INSPECTION OCCUPATIONAL SAFETY GRASS VALLEY AREA

#### **Summary**

On March 10, 2009, a formal Chapter 12 Inspection (Occupational Safety) was conducted in the Grass Valley Area by Sergeant Whiting, # 12888.

#### 1: Goals and Accomplishments

The Grass Valley Area was found to have an overall impressive safety record. There was increase in reportable collisions and disabling injuries. The two disabling injuries were non-preventable.

b (4): The Grass Valley Area discusses safety issues with everyone in the command during training days and in daily briefings.

#### 2: Participation

The Grass Valley Area has active participation from every member of their Area including the Commander. An example of active participation by management is that on a monthly basis, the sergeants write a safety tip on every officer's CHP 100 form. In addition, the Occupational Safety Board is located in a prominent position in the Area's briefing room.

#### 3: Accident and Injury Trends

For the past three years, the Grass Valley Area has experienced one preventable patrol car collision. Any potential trends are discussed in briefing and at the COSC.

a. The Commander actively reviews the CHP 113 along with the OSHA 300 log on a monthly basis. This report not only identifies all of the accidents occurring in the Area it also displays the causes for the accident. Patterns are easily identified. The Commander ensures the problem areas are addressed with additional enforcement.

#### 4: Command Occupational Safety Committee (COSC)

The COSC consists of one person from each collective bargaining unit. The last meeting was held on January 14, 2009. The previous meeting was held on October 08, 2008. The minutes were readily available.

- a(7): The Area is currently achieving its goals, therefore no additional meetings are required or necessary.
- c(1): Currently, the Area Coordinator, Sergeant Whiting, completes the meeting minutes and submits them to the Commander for his review and approval.

#### 5: Documentation

The Area's documentation is completed in a timely manner in accordance with Departmental Policy.

#### 6: Injury Illness Prevention Program

The Area IIPP is located in the Sergeant's Office in the Area Occupational Safety Binder. All employees are aware of its location and contents. The CHP 712a were all accounted for and are current.

#### 7: Communication with DOSH

The Grass Valley Area is aware of procedures regarding DOSH inspections and has all documents readily available for review.

#### 8: Hazardous Substance Program

All hazardous materials were properly identified and labeled. The Material Safety Data Sheets were located in a binder in the ASM's office.

#### 9: Hazardous Exposure Control Programs

The Grass Valley Area is in compliance with the Department's policy regarding this item.

Matt Whiting, 12888 Sergeant

# **COMMAND INSPECTION PROGRAM** FXCEPTIONS DOCUMENT

Command:	Division:	Chapter:	
Gold Run	Division	12	
Inspected by:	***	Date:	
Sgt. Paul Wolowic		04/07/2009	

. age 1 of 3

TYPE OF INSPECTION  ☐ Division Level ☐ Command I  ☐ Executive Office Level	_evel	Total hours expended on the inspection:		Corrective Action Plan Included  Attachments Included		
Follow-up Required:  Solution Yes No Due Date Date Date Date Date Date Date Dat						
Chapter Inspection:						
Inspector's Comments Regar	ding In	novative Practices	S:			

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter

The Gold Run Area has installed a second mesh grill on the front of the siren / public address speaker housing on the patrol vehicles to allow operation during severe winter storms. The two plates are separated by a half inch spacer. The two plates prevent the siren and PA from being muted as freezing ow builds up on the outer grill.

To enhance the safety of all personnel and the public during freezing conditions, the Area procures salt from the Whitmore Caltrans maintenance facility to apply to the pavement on public walkways, in the secure parking lot and at the gas pump island.

Command Suggestions for Statewide Improvement:

The command's occupational safety program works well for the size of the command. The command continues to enjoy an excellent occupational safety record. The area has not experienced a preventable injury or a preventable collision from January 2008 to date.

Inspector's Findings:

- The command level inspection found that Area's Occupational Safety Program is effective. The Commander is a strong advocate of the occupational safety program. He attends the occupational safety committee meeting and discusses safety issues during area training days. Area sergeants address occupational safety issues monthly on the officer's 100 forms.
- Officers participating in practical exercises during Area training days are required to wear the utility uniform. The ballistic vest is required for range operations. Eye and ear protection is provided.
- Required hazardous material placards are posted and a mandated eye wash station was recently procured for the garage area. Work stations are organized for efficiency and comfort. The Auto Technician and Janitor follow safe work practices and wear protective gear as needed.

Cryb o

# **COMMAND INSPECTION PROGRAM**FXCEPTIONS DOCUMENT

rage 2 of 3

Command:	Division:	Chapter:
Gold Run	Division	12
Inspected by:		Date:
Sgt. Paul Wolowic		04/07/2009

Commander's Response: ☐ Concur or ☐ Do Not Concur (Do Not Concur shall document basis for response)	
A.	
Inspector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, etc.)	

# COMMAND INSPECTION PROGRAM TXCEPTIONS DOCUMENT

rage 3 of 3

Command: Gold Run	Division: Division	Chapter:
Inspected by: Sgt. Paul Wolov	wic	Date: 04/07/2009

Required Action	
Corrective Action Pla	n/ I imeline

No corrective action required.

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE	DATE 4/1/69
	INSPECTOR'S SIGNATURE	6/1/09
Reviewer discussed this report with employee  Concur  Do not concur	REVIEWERS SIGNATURE	07/21/09

STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

# OCCUPATIONAL SAFETY

HP 453M (Rev. 5-06) OPI 009

(201	D RON	
AREA	DIVISION	NUMBER
221	Valley	
EVALUATED BY		DATE
Sgt. Paul Wolowic		04/07/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EV.		rmal Evaluation	SUSPENSE DATE 04/07/2009			
FOLLOW-UP	REQUIRED  No	☐ Correction Report	COMMANDER'S REVIEW	i i	DATE 4//	3/09
1. GOAL	S AND ACCOMPLISHM	ENTS	EVALUATED Yes	ACTION REQUIRED No	N/A	
	the command familiar with fety Manual, Chapter 13?	the Occupational Safety Program	as outlined in HPM 10.6,	Occupational	✓ Yes	□No
(1)	Are goals developed in	accordance with departmental polic	cy?		✓ Yes	□No
(2)	Are environmental facto	ors, exposure factors, and past expe	erience/trends considered	when setting goals?	✓ Yes	□No
(3)	Are illness and non-seri	ous/non-traumatic injuries excluded	from occupational safety	goals?	✓ Yes	□No
(4)	Are goals appropriately	categorized?			✓ Yes	□No
(5)	Are goals realistic?				✓ Yes	□No
(6)	Are goals consistent with	h departmental objectives?			Yes	□No
(7)	Is input from all levels co	onsidered before goals are establish	hed?		Yes	□No
b. Are	goals being accomplishe	ed?			✓ Yes	□No
(1)	Accurate reporting on Cl	HP 113, Accident and Injury Report	?		✓ Yes	□No
(2)	Are accidents increasing	1?			☐ Yes	☑ No
(3)	Are injuries increasing?				☐ Yes	☑ No
(4)	Why are they increasing	/decreasing? The area is comprise	ed of generally senior pers	sonnel. Officers quickly	y gain expe	ertise with
	winter storm operations	and build on previous experience.	The incidence of preven	table injuries and accide	ents is low.	Good
	officer safety practices a	are reinforced during Area training	days and on monthly 100	) forms,		
(5)	Is CHP 113, Accident an	d Injury Report, posted or readily a	ccessible?		✓ Yes	□No
(6)	Are employees knowledg	geable about goals and achieveme	nts?		✓ Yes	□No
(7)	Are employees providing	suggestions toward goal attainme	nt?		✓ Yes	□No
2. PARTIC	CIPATION		Yes Yes	ACTION REQUIRED No	CORRECTED N/A	
a. Con	nmander actively involved	I in program?			✓ Yes	□No
(1)	Commander active in inju	ury/illness case management?			✓ Yes	□No
(2)	What is the commander's	s attitude regarding occupational sa	afety? Lieutenant Arrabit	is a strong advocate of	the Arca's	occupational
	safety program, He pror	notes the command's annual fitnes	s challenge and believes	that physical fitness is a	major con	nponent in
	preventing illness and in	jury.				

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1111)			
	(3) Occupational safety issues discussed at staff meetings and training days?		✓ Yes	□No
	(4) Are safety issues in the meeting minutes?		✓ Yes	□No
	(5) Commander comments regarding safety issues in performance evaluations?		✓ Yes	□No
	(6) Does the commander ensure use of appropriate safety equipment?		✓ Yes	□No
b.	Are managers/supervisors actively involved in the program?		✓ Yes	☐ No
	(1) Are managers/supervisors involved in case management?		✓ Yes	□No
	(2) Do they have the appropriate attitude?		✓ Yes	□No
	(3) Are managers monitoring supervisors' progress and efforts to attain goals?		✓ Yes	□No
	(4) Are supervisors monitoring employees' efforts?		✓ Yes	□No
	(5) Do managers comment on safety issues in performance evaluations?		✓ Yes	□No
	(6) Do supervisors comment on safety issues in performance evaluations?		✓ Yes	□No
	(7) Do managers/supervisors ensure the use of proper safety equipment?		✓ Yes	□No
C.	Are employees actively involved in the Occupational Safety Program?		✓ Yes	□No
	(1) Are employees involved in their case management?		✓ Yes	□No
(	(2) Are employees knowledgeable about safety goals?		✓ Yes	□No
(	(3) Are they aware of the command's achievements?		✓ Yes	□No
(	(4) Are employees practicing safety while performing their duties?		√ Yes	□No
(	(5) Are employees reporting unsafe conditions and/or work practices?		✓ Yes	□No
(	(6) Do employees work cooperatively to minimize hazards?		√ Yes	□No
(	(7) Do employees offer suggestions to improve occupational safety?		✓ Yes	□No
(	(8) Is employee equipment properly used and maintained?		☐ Yes	□No
3. ACC	CIDENT AND INJURY TRENDS  EVALUATED Yes	ACTION REQUIRED	CORRECTED N/A	
а. (	Commander's method of identifying trends? Licutenant Arrabit reviews all CHP 1	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	LCH268	ıd is involved
	in any of these cases, then work practices or procedures are changed accordingly.			
(*	Are accidents and injuries being monitored to identify trends?		✓ Yes	□No
(2	2) Is the Occupational Safety Committee reviewing CHP 113, Accident and Injury Log of Occupational Injuries and Illnesses, entries, prior meeting minutes?	Report, OSHA 300,	✓ Yes	□No
(3	3) Are personnel in the command aware of current and potential trends?		✓ Yes	□No
b. V	What corrective action has the command taken when a trend has been identified?	Officers are routinely briefed	l as to the ca	nusative
fa	actors involved in injuries and vehicle accidents. Group input and discussions are c	encouraged to prevent future	incidents.	

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1) Are commanders, managers, and supervisors actively im-	npleme	enting correcti	ve actions?		✓ Yes	□No
4. (	OMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	136	VALUATED 'es	No	REQUIRED	CORRECTED N/A	
а	What is the composition of the COSC? Commander, Occupa	ational	Safety Sergea	int, Officer Su	pervisor, Special D	uty Office	r, Auto
	Technician, Area Janitor.						
	(1) Is there representation from each collective bargaining un	nit?				√ Yes	□No
	(2) Management and supervisory representation?					✓ Yes	□No
	(3) Command Safety Coordinator assigned?					✓ Yes	□No
	(4) Command Safety Coordinator active and effective?					✓ Yes	□No
	(5) Are committee assignments rotated?					☐ Yes	☑ No
	(6) COSC meetings held quarterly?					✓ Yes	□No
	(7) Are meetings held more frequently when goals are not be	eing at	tained?			✓ Yes	□No
	(8) Do all committee members attend the meetings?					✓ Yes	□No
b.	Are roles and responsibilities defined in accordance with IIPP	?				✓ Yes	□No
	(1) Do committee members understand their roles and respo	nsibili	ties?			✓ Yes	□No
	(2) Is an agenda prepared prior to the meeting?					✓ Yes	□No
	(3) Are departmental and Division Occupational Safety meeti	ings m	ninutes readily	available?	¥.	✓ Yes	□No
	(4) Are these minutes utilized for Area meetings?					✓ Yes	□No
	(5) Are assignments given during Area meetings?					✓ Yes	□No
C.	Minutes prepared for the COSC meeting?					✓ Yes	□No
	(1) Recording secretary appointed?					✓ Yes	□No
	(2) Minutes posted on command's Occupational Safety Board	d?				✓ Yes	□No
	(3) Are minutes included in IIPP file?					✓ Yes	□No
	(4) Minutes maintained current year, plus three?					✓ Yes	□No
	(5) Minutes forwarded through channels?					✓ Yes	□No
d.	Is the COSC effective?					✓ Yes	□No
	(1) Are COSC recommendations clear, concise and pertinent	t to the	e command?			✓ Yes	□No
	(2) COSC proactive to eliminate potential causes of accidents	s and i	injuries?			✓ Yes	□No
	(3) COSC disseminate current information and training regard	ding h	ealth and safe	ty issues?		✓ Yes	□No
e.	Do all personnel receive current information regarding health a	and sa	ifety?			✓ Yes	□No
f.	Are outside agency safety programs utilized as a resource?					✓ Yes	□No
g.	Does the command maintain an effective health and safety co	mmun	ications syste	m?		✓ Yes	□No

### AREA MANAGEMENT EVALUATION

**OCCUPATIONAL SAFETY** 

;HP 453M (Rev. 5-06) OPI 009						
(1) Potential hazards reported on CHP 113B, Hazard Report/Inspection	on?	✓ Yes	□ No			
(2) Are findings of the 113B, Hazard Report/Inspection, report dissemi	inated according to policy?	✓ Yes	□No			
(3) Do all members of the command participate in distribution of safety	✓ Yes	□No				
(4) COSC minutes posted in a timely manner?	✓ Yes	□ No				
(5) Required posters prominently displayed?	✓ Yes	□No				
(6) COSC maintain the Command Occupational Safety Bulletin Board?	?	✓ Yes	□No			
(7) Are responsibilities for the Occupational Safety Bulletin Board contra	(7) Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific members?					
5. DOCUMENTATION Yes	ACTION REQUIRED No	CORRECTE N/A	D			
a. STD 261s, Authorization to Use Privately Owned Vehicles on State Bus filed in the employee's field folder?	siness, completed annually and	✓ Yes	□No			
<ul> <li>DMV INF 254, Government Agency Request for Driver License/Identific to request driver's license record check and filed in the employee's field</li> </ul>		☐ Yes	☑ No			
c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?		✓ Yes	□No			
(1) Are required injuries and illnesses logged?		✓ Yes	□No			
(2) Entries made within six working days of notification of an employee	injury or illness?	✓ Yes	□No			
(3) Is lost-time and limited-duty documentation accurate?		✓ Yes	□No			
(4) Retention according to policy?	✓ Yes	□No				
(5) Readily accessible for review by Cal-OSHA?		₅ ✓ Yes	□No			
(6) Previous calendar year log posted during February?		✓ Yes	□No			
d. Are CHP 113s, Accident and Injury Report, compiled accurately?		✓ Yes	□No			
(1) Commander review and sign?		✓ Yes	□No			
(2) CHP 113s and attachments processed in a timely manner?		✓ Yes	□No			
e. Does the command utilize the CHP 113A, Safety Inspection Checklist?		✓ Yes	□No			
(1) Are semiannual safety inspections conducted?		✓ Yes	□No			
(2) Are safety hazards identified?		✓ Yes	□No			
(3) Is corrective action taken within 30 days?		✓ Yes	□No			
(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and re-	etained according to policy?	✓ Yes	□No			
f. Are unsafe conditions identified and documented on CHP 113B, Hazard	Report/Inspection?	✓ Yes	□No			
(1) Measures taken to correct situation within 30 days?	✓ Yes	□No				
(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to II	IPP?	✓ Yes	□No			
g. Are the CHP 121 series thoroughly and accurately completed?		✓ Yes	□No			
(1) Supervisory comments in-depth, clear, and concise?		✓ Yes	□ No			
(2) Commander signature on appropriate forms?		✓ Yes	□No			

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

### AREA MANAGEMENT EVALUATION **OCCUPATIONAL SAFETY**

HP 453M (Rev. 5-06) OPI 009

2111 1001	m (1.64: 6 66) C1 1 665					
(3)	) Routed within time frames?			√ Yes	□No	
h. Is CHP 208, Accident Prevention Report, thoroughly and accurately completed?					□No	
(1)	✓ Yes	□No				
(2)	· · · · · · · · · · · · · · · · · · ·	_☑ Yes	No			
(3)	) Commander signs appropriate form?			√ Yes	□No	
(4)	) Properly routed within time limits?			✓ Yes	□No	
i. Are	e injuries and accidents documented on CHP 442, Individual /	Accident, Injury and	Safety Recognition Record?	✓ Yes	□No	
(1)	) Are CHP 442s, Individual Accident, Injury and Safety Reco	gnition Record, curr	ent?	✓ Yes	□No	
(2)	) Safety recognition emblem summary current?			✓ Yes	□No	
j. Are	e CHP 712As, Injury and Illness Prevention Program Orientati	on and Review, kep	ot current?	✓ Yes	□ No	
(1)				✓ Yes	□No	
(2)	Copies maintained with IIPP file?			✓ Yes	☐ No	
	RY AND ILLNESS PREVENTION PROGRAM	EVALUATED	ACTION REQUIRED	CORRECTED		
on 't bei		Yes	No	N/A  ✓ Yes	□No	
	a. Command specific IIPP on file?					
(1)		✓ Yes	□ No			
(2)	✓ Yes	□ No				
(3)	✓ Yes	□ No				
(4)	✓ Yes	□No				
(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program C	rientation and Review?	✓ Yes	□No	
(6)	New employees review and complete CHP 712A, Injury and and Review?	d Illness Prevention	Program Orientation	✓ Yes	□No	
(7)	Are unsafe hazards or conditions identified, investigated, co	orrected, and docum	ented?	✓ Yes	□No	
(8)	Is required documentation maintained according to policy?			✓ Yes	□No	
7. COMM	IUNICATION WITH DOSH	EVALUATED Yes	ACTION REQUIRED	CORRECTED N/A		
a. Em	ployees aware of procedures regarding DOSH inspections?	1 65	No	✓ Yes	□No	
	mmand's documents readily available for review by DOSH Co	ompliance Officer?		✓ Yes		
	CORRECTED					
8. HAZAF	N/A	_				
a. Doe	✓ Yes	□ No				
(1)	✓ Yes	☐ No				
(2)	✓ Yes	□No				
(3)	✓ Yes	□No				
(4)	Employees receive training?			✓ Yes	□No	
(4)	Employees receive training?			✓ Yes	□No	

c453m506.pdf

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(5) Training documented?				✓ Yes	□No
(6) Employees informed of their right	) Employees informed of their right to applicable medical and exposure information?				□No
. HAZARDOUS EXPOSURE CONTROL PROGRAMS  EVALUATED Yes  ACTION REQUIRED no					
a. Activities identified within command the	✓ Yes	□No			
(1) Appropriate engineering and/or a	✓ Yes	□No			
(2) Protective equipment provided in	✓ Yes	□No			
(3) Employees trained on use and maintenance of equipment?				✓ Yes	□No
(4) Training documented?				✓ Yes	□No

### **COMMAND INSPECTION PROGRAM EXCEPTIONS DOCUMENT**

Command:	Division:	Chapter:	
(223) Donner	Valley	12	
Inspected by:		Date:	
Sat Bousquet	03/17/09		

rage 1 of 3						
INSTRUCTIONS: This document shall be number of the inspection in the Chapter shall be routed to and its due date. This improvement, identified deficiencies, con	Inspection documents	on number. Under "Fon ent shall be utilized to do	ward to:" enter the ne cument innovative pr	fill in the blanks as indicated. Enter the chapter ext level of command where the document ractices, suggestions for statewide e used if additional space is required.		
TYPE OF INSPECTION  Division Level X Command Level  Executive Office Level		Total hours expende inspection:	ed on the	X Corrective Action Plan Included  Attachments Included		
Follow-up Required:	Forwa					
Chapter Inspection:	en Galva					
Inspector's Comments Regar	dina Ir	novative Practice	s.			
Practices in place are standard			J			
Command Suggestions for St	atewic	le Improvement:				
suggestions for statewide in	mprov	ement.				
Inspector's Findings:						
Occupational safety programs	at the	area level met or	exceeded the D	epartment's expectations.		
Commander's Response: X Concur or Do Not Concur (Do Not Concur shall document basis for response)						
Inspector's Comments: Shall a	ddress	non concurrence by o	ommander (e.g., fi	ndings revised, findings unchanged,		

CHP 680A (Rev 02-09) OPI 010

### COMMAND INSPECTION PROGRAM CXCEPTIONS DOCUMENT

rage 2 of 3

Command:	Division:	Chapter:	
(223) Donner	Valley	12	
Inspected by:		Date:	
Sgt. Bousquet		03/17/09	

7.77		
Required Action		
	. 6	
Corrective Action Plan/Time	ine	
All issues poted during the in		

All issues noted during the inspection have been corrected. In order to ensure continued compliance a re-inspection will be conducted during the first quarter of 2010.

Employee would like to discuss this report with the reviewer.  (See HPM 9.1, Chapter 8 for appeal procedures.)	COMMANDER'S SIGNATURE  L7.	5/18/09
	INSPECTOR'S SIGNATURE	DATE
	RCON STOR	5-18-09
Reviewer discussed this report with	REVIEWER'S SIGNATURE	DATE / 0
employee	+ A + 10	- boll 9
Concur Do not concur	The take	2/2901

# COMMAND INSPECTION PROGRAM TXCEPTIONS DOCUMENT

rage 3 of 3

Command: (223) Donner	Division: Valley	Chapter: 12	
Inspected by: Sgt. Bousquet	***	Date: 03/17/09	

### **COMMAND INSPECTION PROGRAM TYCEPTIONS DOCUMENT**

	Donner Pass	Valley	12
ı	IF		
ı	Inspected by: Sergean	t Bousquet	Date: March 17, 2009

Division:

Chapter:

rage 1 of 3			12 14 14 14 14 14 14 14 14 14 14 14 14 14
number of the inspection in the Chapter shall be routed to and its due date. This	Inspecti docume	Check appropriate boxes as necessary, or for number. Under "Forward to:" enter the neent shall be utilized to document innovative praction plans. A CHP 51 Memorandum may be	actices, suggestions for statewide
TYPE OF INSPECTION  Division Level Command L  Executive Office Level		Total hours expended on the inspection:	☐ Corrective Action Plan Included ☐ Attachments Included
Follow-up Required:	Forwa	rd to: VALLEY DIV.	
Yes X No	Due D	rd to: VALLEY DIV. ate: 5/14/09	
TAKE BELLEVILLE TAKEN	Carried St.	TO THE STATE OF THE PARTY OF TH	Manufacture of the Control of the Co
Chapter Inspection:			
Inspector's Comments Regar	ding Ir	nnovative Practices:	
All practices are consistent wit	h insp	ection facilities Statewide.	
Command Suggestions for St	tatewic	le Improvement:	
nere are no suggestions for a incompliance with procedures.	-	atewide improvement as the inspe	ctor found that all aspects were
Inspector's Findings:			
	imme	diately corrected within the standa	rds of policy.
Commander's Response: д	Concu	r or 🗌 Do Not Concur (Do Not Conc	cur shall document basis for response)
None.			

Command:

spector's Comments: Shall address non concurrence by commander (e.g., findings revised, findings unchanged, Letc.)

### COMMAND INSPECTION PROGRAM

FYCEPTIONS DOCUMENT

rage 2 of 3

Command: Donner Pass IF	Division: Valley	Chapter:
Inspected by: Sergea	Date: March 17, 2009	

None.

# STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL COMMAND INSPECTION PROGRAM FYCEPTIONS DOCUMENT

Command:	Division:	Chapter:
Donner Pass IF	Valley	12
Inspected by: Sergear	Date: March 17, 2009	

⊢age 3 of 3

CONTRACTOR AND	Line Envious		Mark Plants				
Required Action					品能強國		
。	到50年10月1日1日1日	MANUAL PROPERTY.	中国的政治的政治	POR HUG.		TANKS E.S.	
Corrective Action Plan/Ti	meline						

All discrepancies were corrected immediately upon discovery.

Employee would like to discuss this report with the reviewer.	COMMANDER'S SIGNATURE	DATE
(See HPM 9.1, Chapter 8 for appeal procedures.)		
	INSPECTOR'S SIGNATURE	DATE
	Mua Bourg tet	5-13-09
Reviewer discussed this report with	REVIEWER'S SIGNATURE	DATE
employee	Will Well Li.	5/14/09

Department of California Highway Patrol AREA MANAGEMENT EVALUATION Chapter 12 OCCUPATIONAL SAFETY	Area	Division	Number
	223	Valley	223-09-001
	Evaluated E	By Sgt. Bousquet	Date 3/17/09

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed in the Summary Statement. The Summary Statement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Summary can be handwritten if desired.

Type of Evaluation ☐Formal	⊠Informal	Suspense Date	}		
Follow-up Required ☐Yes ⊠No	d Correction Report	Commander's		حر. 5 Date	14/09
1. GOALS AND A	CCOMPLISHMENTS	Evaluated	Action Required	Correc	cted
a. Is the comma in HPM 10.6, Ch	and familiar with the Occupatio	nal Safety Program	as outlined	⊠Yes	□No
(1) Are goals	developed in accordance with	departmental polic	y?	⊠Yes	□No
	onmental factors, exposure fac ered when setting goals?	tors, and past expe	rience/	⊠Yes	□No
(3) Are illness occupational s	ses and non-serious/non-traum safety goals?	natic injuries exclud	ed from	⊠Yes	□No
(4) Are goals	appropriately categorized?			⊠Yes	□No
(5) Are goals	realistic?			⊠Yes	□No
(6) Are goals	consistent with departmental of	bjectives?		⊠Yes	□No
(7) Is input fro	om all levels considered before	goals are establish	ned?	⊠Yes	□No
b. Are goals bei	ng accomplished?			⊠Yes	□No
(1) Accurate r	reporting on CHP 113?			⊠Yes	□No
(2) Are accide	ents increasing?			∐Yes	⊠No
(3) Are injurie	s increasing?			∐Yes	⊠No
(4) Why are th	ney increasing/decreasing?	I/A			
(5) Is CHP 11	3 posted or readily acc essible?	)		□Yes	⊠No
(6) Are employ	yees knowledgeable a out goa	als and achievemer	nts?	⊠Yes	□No
(7) Are employ	yees providing suggestions tov	vard goal attainmer	nt?	⊠Yes	□No
CHP 453M (Rev 1-9	96)				Page 1

2. PARTICIPATION	Evaluated	Action Required	Corrected	
a. Commander actively involved in prog	ram?		⊠Yes	□No
(1) Commander active in injury/illness	s case management	?	⊠Yes	□No
(2) What is the commander's attitude	regarding occupatio	nal safety?		
See narrative on Page 7.				
(3) Occupational safety issues discus	sed at staff meetings	and training days?	⊠Yes	□No
(4) Are safety issues in the meeting n	ninutes?		⊠Yes	□No
(5) Commander comments regarding	safety issues in perf	ormance evaluations	? 🛛 Yes	□No
(6) Does the commander ensure use	of appropriate safety	equipment?	⊠Yes	□No
b. Are managers/supervisors actively in	volved in the progran	1?	⊠Yes	□No
(1) Are managers/supervisors involve	d in case manageme	ent?	⊠Yes	□No
(2) Do they have the appropriate attitu	ıde?		⊠Yes	□No
(3) Are managers monitoring supervis	sors' progress and ef	forts to attain goals?	⊠Yes	□No
(4) Are supervisors monitoring employ	/ees' efforts?		⊠Yes	□No
(5) Do managers comment on safety	issues in performand	e evaluations?	⊠Yes	□No
(6) Do supervisors comment on safety	y issues in performar	nce evaluations?	⊠Yes	□No
(7) Do managers/supervisors ensure	the use of proper saf	ety equipment?	⊠Yes	□No
c. Are employees actively involved in the	Occupational Safety	/ Program?	⊠Yes	□No
(1) Are employees involved in their ca	se management?		⊠Yes	□No
(2) Are employees knowledgeable abo	out safety goals?		⊠Yes	□No
(3) Are they aware of the command's	achievements?		⊠Yes	□No
(4) Are employees practicing safety wi	hile performing their	duties?	⊠Yes	□No
(5) Are employees reporting unsafe co	onditions and/or work	practices?	⊠Yes	□No
(6) Do employees work cooperatively	to minimize hazards'	?	⊠Yes	□No
(7) Do employees offer suggestions to	improve occupation	al safety?	⊠Yes	□No
(8) Is employees' equipment properly	used and maintained	?	⊠Yes	□No
3. ACCIDENT AND INJURY TRENDS	Evaluared	Action Required	Corrected	
a. Commander's method of identifying tre	ends?			
See narrative on Page 7.				
CUE (FOLL (F				O

(1) Are accidents and injuries being i	monitored to identify t	trends?	⊠Yes	□No
(2) Is the Occupational Safety Comm OSHA 200 Log entries, prior meeting		113,	∐Yes	⊠No
(3) Are personnel in the command as	ware of current and p	otential trends?	⊠Yes	□No
b. What corrective action has the comn	nand taken when a tr	end has been identifi	ed?	
See narrative on pages 7 & 8.				
(1) Is commander, the managers, su corrective actions?	pervisors, actively im	plementing	⊠Yes	□No
4. COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	Evaluated 🖂	Action Required	Corrected	
a. What is the composition of the COSC	27			
See narrative on Page 8.				
***************************************				
(1) Is there representation from each	collective bargaining	unit?	⊠Yes	□No
(2) Management and supervisory rep	resentation?		⊠Yes	□No
(3) Command Safety Coordinator ass	signed?		⊠Yes	□No
(4) Command Safety Coordinator act	ive and effective?		⊠Yes	□No
(5) Are Committee assignments rotat	ed?		⊠Yes	□No
(6) COSC meetings held quarterly?			⊠Yes	□No
(7) Are meetings held more frequently	y when goals are not	being attained?	⊠Yes	□No
(8) Do all Committee members attended	d the meetings?		⊠Yes	□No
b. Are roles and responsibilities defined	in accordance with II	IPP?	⊠Yes	□No
(1) Do Committee members understa	and their roles and re	sponsibilities?	∐Yes	⊠No
(2) Is an agenda prepared prior to the	meeting?		∐Yes	⊠No
(3) Are departmental and Division Oc readily available?	cupational Safety me	eeting minutes	⊠Yes	□No
(4) Are these minutes utilized for Area	a meetings?		⊠Yes	□No
(5) assignments given during Area m	eetings?		⊠Yes	□No
c. Minutes prepared for the COSC meet	ing?		⊠Yes	□No
(1) Recording secretary appointed?			⊠Yes	□No
(2) Minutes posted on command's Oc	cupational Safety Bo	pard?	∐Yes	⊠No

(3) Are minutes included in IIPP file?			⊠Yes	□No
(4) Minutes maintained current year, plus three?				□No
(5) Minutes forwarded through channels?				□No
d. Is the COSC effective?			⊠Yes	□No
(1) Are COSC recommendations cle	ar, concise and pertir	nent to the command	? ⊠Yes	□No
(2) COSC proactive to eliminate pote	ential causes of accid	ents and injuries?	⊠Yes	□No
(3) COSC disseminate information/tr	aining regarding heal	Ith and safety issues?	? ⊠Yes	□No
e. Do all personnel receive current info	mation regarding hea	alth and safety?	⊠Yes	□No
f. Are outside agency safety programs	utilized as a resource	?	⊠Yes	□No
g. Does the command maintain an effe	ctive health/safety co	mmunications syster	n? ⊠Yes	□No
(1) Potential hazards reported on CH	P 113B?		⊠Yes	□No
(2) Are findings of the 113B report dis	sseminated according	g to policy?	⊠Yes	□No
(3) Do all members of the command and health information?	participate in distribu	tion of safety	⊠Yes	□No
(4) COSC minutes posted in a timely	manner?		⊠Yes	□No
(5) Required posters prominently disp	olayed?		⊠Yes	□No
5. DOCUMENTATION	Evaluated	Action Required	Corrected	
a. STD 261s completed annually and fil	ed in employee's field	d folder?	⊠Yes	□No
b. DMV INF 254 utilized to request drive in the employee's field folder?	er's license record ch	eck and filed	⊠Yes	□No
c. OSHA 200 Log utilized?			⊠Yes	□No
(1) Are required injuries and illnesses	logged?		⊠Yes	□No
(2) Entries made within six working di injury or illness?	ays of notification of a	an employee	⊠Yes	□No
	nentation accurate?		⊠Yes	□No
				□No
(4) Retention according to policy?	2-1-001100		⊠Yes	
(5) Readily accessible for review by C			⊠Yes	
(6) Previous calendar year Log poste	d during February?		∑Yes	□No
d. Are CHP 113s compiled accurately?			⊠Yes	□No
(1) Commander review and sign?			⊠Yes	No

(2) CHP 113s and attachments prod	ner?	⊠Yes	□No	
e. Does the command utilize the CHP 113A?				□No
(1) Are semi-annual safety inspection	ns conducted?		⊠Yes	□No
(2) Arafety hazards identified?			⊠Yes	□No
(3) Is corrective action taken within	30 days?		⊠Yes	□No
(4) CHP 113A maintained with IIPP	and retained accordi	ng to policy?	⊠Yes	□No
f. Are unsafe conditions identified and	documented on CHP	113B?	⊠Yes	□No
(1) Measures taken to correct situati	on within 30 days?		⊠Yes	□No
(2) Copy of CHP 113B filed or attack	ned to IIPP?		⊠Yes	□No
g. Are the CHP 121 series forms thoro	ughly and accurately	completed?	⊠Yes	□No
(1) Supervisory comments in-depth,	clear and concise?		⊠Yes	□No
(2) Commander signature on approp	oriate forms?		⊠Yes	□No
(3) Routed within time frames?			⊠Yes	□No
h. Is CHP 208 form thoroughly and accurately completed?				□No
(1) Supervisor comments in-depth, of	lear and concise?		⊠Yes	□No
(2) Commander review?			⊠Yes	□No
(3) Commander signs appropriate fo	rm?		⊠Yes	□No
(4) Properly routed within time limits?				□No
i. Are injuries and accidents documente	ed on CHP 442?		⊠Yes	□No
(1) Are CHP 442s current?			⊠Yes	□No
(2) Safety recognition emblem summ	nary current?		⊠Yes	□No
j. Are CHP 712As kept current?			⊠Yes	□No
(1) Is specific safety training docume	nted on CHP 712?		⊠Yes	□No
(2ies maintained with IIPP file?			□Yes	⊠No
6. INJURY AND ILLNESS PREVENTIONOGRAM	Evaluated	Action Required	Corrected	
a. Command specific IIPP on file?			⊠Yes	□No
(1) Is the program effective?			⊠Yes	□No
(2) Contains all required documents?	,		⊠Yes	□No
(3) Discussed with all employees?			⊠Yes	□No
(4) All employees understand their ro	les and responsibiliti	es?	⊠Yes	□No
(5) Each employee completed CFP 7	'12A?		⊠Yes	□No

(6) New employees review and comp	olete CHP 712A?		⊠Yes	□No
(7) Are unsafe conditions identified, investigated, corrected and documented?				□No
(8) Is required documentation mainta	ined according to po	licy?	⊠Yes	□No
7. COMMUNICATION WITH DOSH	Evaluated 🖂	Action Required	Corrected	
a. Employees aware of procedures rega	arding DOSH inspect	ions?	□Yes	⊠No
b. Command's documents available for	review by DOSH Co	mpliance Officer?	□Yes	⊠No
8. HAZARDOUS SUBSTANCE PROGRAM	Evaluated	Action Required	Corrected	
a. Does command have a written Hazar used within that command?	dous Substance Pro	gram for substances	⊠Yes	□No
(1) Are hazardous substances identified and properly labeled?			⊠Yes	□No
(2) Warning signs posted?			⊠Yes	□No
(3) Material Safety Data Sheets readily available?				□No
(4) Employees receive training?			⊠Yes	□No
(5) Training documented?			⊠Yes	□No
(6) Employees informed of their right information?	to applicable medica	I and exposure	⊠Yes	□No
9. HAZARDOUS EXPOSURE CONTROL PROGRAMS	Evaluated	Action Required	Corrected	
<ul> <li>a. Activities identified within command the hazardous conditions?</li> </ul>	nat may require expo	sure to	⊠Yes	□No
(1) Appropriate engineering and/or administrative controls implemented?			⊠Yes	□No
(2) Protective equipment provided per bargaining unit agreements?			⊠Yes	□No
(3) Employees trained on use and ma	intenance of equipm	ent?	⊠Yes	□No
(4) Training documented?		***	⊠Yes	□No
COMMENTS				
CHP 453M (Rev 1-96)				Page 6

Chapter 12 Inspection
Donner Pass Inspection Facility
March 17, 2009
Page 7

### 1. Goals and Accomplishments:

- 1.a.(1)(2)(7) Occupational safety goals are based on past accomplishments. They are realistic and consistent with Departmental and facility objectives.

  Employees are encouraged to participate in the facilities occupational safety program and provide input at every opportunity.
- 1.b. Facility personnel have continued their awareness of hazards which has resulted in successfully attaining goals.
- 1.b.(5) The CHP 113 is not posted but accessible to facility personnel, due to HIPPA and personnel privacy issues.

#### 2. Participaton:

- 2.a. The commander is actively involved in the occupational safety program.

  He is a member of the occupational safety committee and stresses safety at meetings, training days, and comments on 100 forms.
- 2.a.(2) The commander's attitude toward occupational safety is enthusiastic and supportive. Occupational safety is a high priority.
- 2.b.(1-7) All three of the facility sergeants are actively involved in case management and the occupational safety committee. One of the sergeants is the occupational safety committee coordinator. They document safety comments on 100 forms and annual evaluations. They have a positive attitude and monitor employees closely to ensure that safety equipment is properly used.
- 2.c.(1-8) Employees are actively involved in the occupational safety program. They work with supervision on their case management and are knowledgeable of the facilities safety goals and achievements. Employees are practicing safe work habits and report unsafe conditions. They offer suggestions for improvements which ultimately reduces hazards.

#### 3. Accident and Injury Trends:

3.a. Although no trends were identified during this inspection, the Commander would take the necessary steps to identify and educate all employees on potential hazards should trends develop.

Chapter 12 Inspection
Donner Pass Inspection Facility
March 17, 2009
Page 8

3.a.(2)(3) Currently the occupational safety committee is not reviewing the CHP 113 and the OSHA 200 log, due to HIPPA and personnel privacy concerns. Prior meeting minutes are reviewed. In the future, the commander and Occupational Safety Coordinator will review the CHP 113 and the OSHA 200 Log to identify previous injury/illness cases that should be discussed in an effort to identify trends. This issue has been corrected.

#### 4. Command Occupational Safety Committee (COSC)

- 4.a.(1)(2) The commander, all three sergeants, office supervisor, two officers, and two CVIS's are members of the occupational safety committee. Each bargaining unit is represented as well as the management team.
- 4.a.(4) The command safety coordinator has recently assumed the duties of the position and is effective on most aspects of the job. However, the previous coordinator was not implementing all aspects of the program. All assignments were not made and roles were not clearly established. This issue has been corrected.
- 4.b.(1) Most of the members have a clear understanding of their roles. Some of the members did not receive directions from the occupational safety coordinator which inhibited them from performing their roles and responsibilities. **This issue has been corrected.**
- 4.b.(2) A formal agenda is not prepared or followed. Usually meetings include notes from the most recent Division occupational safety meeting, minutes from the previous occupational safety committee meeting, and new concerns. The current method has been determined to be effective for a small command operation.
- 4.c.(2) The minutes are not posted on the occupational safety board. They are transcr bed and sent via e-mail to all personnel assigned to the facility.
- 4.g.(7) In the past, a specific assignment for this responsiblity was not delegated.

  This issue has been addressed and corrected.

#### 5. Documentation:

5.b. During the hiring and investigation process of new non-uniformed employees, a drivers license check is completed. The DMV INF 254 form is kept with the employee's service record.

Chapter 12 Inspection
Donner Pass Inspection Facility
March 17, 2009
Page 9

- 5.e.(2) Members of the occupational safety committee are constantly informing the management team of potential safety hazards via e-mail. They have identified hazards and encouraged safe working practices.
- 5.j.(2) CHP 712A's are kept in the employee's field folders.

#### 7. Communication With DOSC:

7.a.b. Employees are not aware of the procedures regarding DOSH inspections.

This issue has been identified and will be addressed at training days in the future.

### 8. Hazardous Substance Program:

8.a.(1-6) Employees are reminded at training days, briefings, etc. of the Hazardous Substance Program. Additionally, all employees receive First Responder Awareness or Operational training annually.

### 9. Hazardous Exposure Control Programs:

9.a.(1-4) Employees are reminded to work within their level of training. Recently, all employees received training from a Caltrans Tech/Spec. regarding the protective equipment and hazardous waste containment products provided.

#### **Summary:**

The Donner Pass Inspection Facility's Occupational Safety program is active in promoting employee safety. All personnel are involved or kept apprised of occupational safety issues and goals. Training is provided at training days, briefings, or annually by qualified safety instructors. Although some discrepancies were noted during this informal inspection, the general requirements and spirit of the program was being followed. The issues that were identified have been resolved.

### COMMAND INSPECTION PROGRAM

Command:	Division:	Chapter:
Chico Area	Valley Division	Chapter 12
Inspected by:		Date:
Sergeant Bruce Carpenter		3/25/09

INSTRUCTIONS: This document shall be typed. Check appropriate boxes as necessary, or fill in the blanks as indicated. Enter the chapter number of the inspection in the Chapter Inspection number. Under "Forward to:" enter the next level of command where the document shall be routed to and its due date. This document shall be utilized to document innovative practices, suggestions for statewide improvement, identified deficiencies, corrective action plans, and may be used to appeal findings. A CHP 51 Memorandum may be used if additional space is required.

Commence of the second			
TYPE OF INSPECTION		Corrective Action Plan Included	
☐ Division Level ☐ Command I	_evel	☐ Appeal Included	
☐ Executive Office Level		☐ Attachments included	
Follow-up Required:	Follow-up Required:	Commander's Signature:	Date: 03/25/2009
☐ Yes	Due Date:	WWW.	03/23/2003
Chapter Inspection:			
Inspector's Comments Regar	ding Innovative Practice	s:	
issues that were found and n	ew procedures have bee	unning very well. There were a coup en put into place.	ole of minor
Command Suggestions for St	atewide Improvement:		
Recurring items should be su	spensed so they are cor	npleted within required timeframes.	
		₽	

Based on the results of this inspection, a couple of new procedures and practices have been implemented. First, the Area has produced a standard agenda for use at all occupational safety meetings. Secondly, the Area missed one of the required semi-annual safety inspections during 2008. The safety inspections have been added to the meeting agenda as a discussion item and a reminder has been set up in the Area's suspense system. Lastly, the Area is due to update employee safety award records to ensure all employees have received the appropriate safety recognition emblem. The Office Services Supervisor has assigned an Office Assistant to update employee safety awards.

Inspector's Findings:

### COMMAND INSPECTION PROGRAM

### **FXCEPTIONS DOCUMENT**

Command: Chico Area	Division: Valley	Chapter: 12
Inspected by: Sergeant Bruc	e Carpenter	Date: 03/25/2009

Page 2

Commander's Response:		

I have reviewed the discrepancies and am satisfied that the procedures implemented will be sufficient corrective action. Overall, the Area's track record shows the program is effective.

Inspector's Comments:

None

### Required Action

Corrective Action Plan/Timeline

A sample agenda has been created. No further correction needed.

The requirement to conduct semi-annual safety inspections was added to the Area's suspense system and also made an agenda item for each meeting. No further corrective action needed.

An office assistant has been assigned to update the employee safety awards record. The Area is in the process of updating the record. No further action is needed at this time.

### **COMMAND INSPECTION PROGRAM**

### **FXCEPTIONS DOCUMENT**

Page 3

Command:	Division:	Chapter:
Chico Area	Valley	12
Inspected by:		Date:
Sergeant Bruce Carpenter		03/25/2009

Appeal Process (s	
Appeal Process: (Appeals shall be filed within five (5) business days of the	e completed chapter inspection).
Commandar's Pasis for Annual:	
Commander's Basis for Appeal:	
None	
Anneal Paviow/Decision: (75)	
Appeal Review/Decision: (This shall be the only level of appeal).	
*	
Lead Inspector's Signature:	Date:
12 +> 5	3-25-09
onding Commander's Signature (for appeal):	Date:

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
CHICO	VALLEY	241-01-09
EVALUATED BY		DATE
B. A. CARPENT	TER	03/24/2009

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION    Formal Evaluation   Informal Evaluation	SUSPENSE DATE				
FOLLOW-UP REQUIRED Correction Report  Yes No  BY	COMMANDER'S REVIEW	DATE 3-2	5-09		
1. GOALS AND ACCOMPLISHMENTS	YES NO	CORRECTED			
<ul> <li>Is the command familiar with the Occupational Safety Program Safety Manual, Chapter 13?</li> </ul>	as outlined in HPM 10.6, Occupational		□No		
(1) Are goals developed in accordance with departmental police	cy?	✓ Yes	□No		
(2) Are environmental factors, exposure factors, and past expe	(2) Are environmental factors, exposure factors, and past experience/trends considered when setting goals?				
(3) Are illness and non-serious/non-traumatic injuries excluded	from occupational safety goals?	✓ Yes	□No		
(4) Are goals appropriately categorized?		✓ Yes	□No		
(5) Are goals realistic?		✓ Yes	□No		
(6) Are goals consistent with departmental objectives?		✓ Yes	□No		
(7) Is input from all levels considered before goals are establish	(7) Is input from all levels considered before goals are established?				
b. Are goals being accomplished?	✓ Yes	□No			
(1) Accurate reporting on CHP 113, Accident and Injury Report	✓ Yes	□No			
(2) Are accidents increasing?	(2) Are accidents increasing?				
(3) Are injuries increasing?		☐ Yes	☑ No		
(4) Why are they increasing/decreasing? Accidents and injuri-	es are decreasing due to an increased awareness	s of sound sa	ıfety		
practices and techniques.					
(5) Is CHP 113, Accident and Injury Report, posted or readily a	ccessible?	Yes	□No		
(6) Are employees knowledgeable about goals and achieveme	nts?	√ Yes	□No		
(7) Are employees providing suggestions toward goal attainme	nt?	✓ Yes	□No		
2. PARTICIPATION	EVALUATED ACTION REQUIRED YES NO	CORRECTED			
a. Commander actively involved in program?	100 mm	✓ Yes	□No		
(1) Commander active in injury/illness case management?	(1) Commander active in injury/illness case management?				
(2) What is the commander's attitude regarding occupational sa	afety? The commander is actively involved in t	he COSC as	the		
chairperson. He promotes occupational safety at Area train	ning days and staff meetings. Occupational saf	ety commen	ts are		
required on all monthly and annual evaluations. All pertin	ent occupational safety information is passed or	n to all perso	onnel.		

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(3) Occupational safety issues discussed at staff meetings and trainin	g days?		✓ Yes	□No
	(4) Are safety issues in the meeting minutes?			✓ Yes	□No
	(5) Commander comments regarding safety issues in performance evaluations?			✓ Yes	□No
	(6) Does the commander ensure use of appropriate safety equipment?			✓ Yes	□ No
b	o. Are managers/supervisors actively involved in the program?			✓ Yes	□No
	(1) Are managers/supervisors involved in case management?			✓ Yes	□No
	(2) Do they have the appropriate attitude?		12101 200	✓ Yes	□No
	(3) Are managers monitoring supervisors' progress and efforts to attai	n goals?		✓ Yes	□No
	(4) Are supervisors monitoring employees' efforts?			✓ Yes	□No
	(5) Do managers comment on safety issues in performance evaluation	ıs?		✓ Yes	□No
	(6) Do supervisors comment on safety issues in performance evaluation	ons?		✓ Yes	□No
	(7) Do managers/supervisors ensure the use of proper safety equipme	ent?		✓ Yes	□No
C.	c. Are employees actively involved in the Occupational Safety Program?			✓ Yes	□No
	(1) Are employees involved in their case management?			✓ Yes	□No
	(2) Are employees knowledgeable about safety goals?			✓ Yes	□No
	(3) Are they aware of the command's achievements?			✓ Yes	□No
	(4) Are employees practicing safety while performing their duties?			✓ Yes	□No
	(5) Are employees reporting unsafe conditions and/or work practices?			✓ Yes	□No
	(6) Do employees work cooperatively to minimize hazards?			✓ Yes	□No
	(7) Do employees offer suggestions to improve occupational safety?			✓ Yes	□No
	(8) Is employee equipment properly used and maintained?			✓ Yes	□No
3. A	ACCIDENT AND INJURY TRENDS  EVALUA YES		CTION REQUIRED	CORRECTED	
а.	. Commander's method of identifying trends?				
	Identify command specific hazards. Evaluating each Area accident and	l injury in a critical	nanner to develop stra	tegies for	the
	prevention of similar incidents in the future. Comparing these incident	s to past occurrence	s to find any and all si	nilarities (	to develop
	viable training or corrective action.				
	(1) Are accidents and injuries being monitored to identify trends?			√ Yes	□No
	(2) Is the Occupational Safety Committee reviewing CHP 113, Acciden Log of Occupational Injuries and Illnesses, entries, prior meeting mi	t and Injury Report, nutes?	OSHA 300,	✓ Yes	□No
	(3) Are personnel in the command aware of current and potential trends?			✓ Yes	□No
b.	. What corrective action has the command taken when a trend has been	identified? No docu	intented injuries or coll	lisions occ	urred in the
	past year. No identified frends or corrective action necessary.				

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

(1) Are c	ommanders, managers, and supervisors actively impl	ementing correctiv	re actions?	✓ Yes	□ No
4. COMMAND	OCCUPATIONAL SAFETY COMMITTEE (COSC)	YES YES	NO REQUIRED	CORRECTED	
a. What is th	e composition of the COSC?		- 11:		
Area Com	mander, Uniformed Supervisor. Uniformed Officer. C	ommunications Co	enter Representative, Clerica	at Staff Represe	ntative.
ASM, and	Janitor.				
(1) Is the	re representation from each collective bargaining unit	?		✓ Yes	□No
(2) Mana	gement and supervisory representation?			✓ Yes	□No
(3) Comn	nand Safety Coordinator assigned?			✓ Yes	□No
(4) Comn	nand Safety Coordinator active and effective?			✓ Yes	□No
(5) Are co	ommittee assignments rotated?			✓ Yes	□No
(6) COSC	meetings held quarterly?			✓ Yes	□No
(7) Are m	eetings held more frequently when goals are not bein	g attained?		☐ Yes	☑ No
(8) Do all	committee members attend the meetings?			√ Yes	□No
b. Are roles a	and responsibilities defined in accordance with IIPP?			√ Yes	□No
(1) Do co	mmittee members understand their roles and respons	ibilities?		√ Yes	□No
(2) Is an a	agenda prepared prior to the meeting?			☐ Yes	☑ No
(3) Are de	epartmental and Division Occupational Safety meeting	s minutes readily	available?	✓ Yes	□No
(4) Are the	ese minutes utilized for Area meetings?			✓ Yes	□No
(5) Are as	signments given during Area meetings?			✓ Yes	□No
c. Minutes pro	epared for the COSC meeting?			✓ Yes	□No
(1) Record	ding secretary appointed?			✓ Yes	□No
(2) Minute	s posted on command's Occupational Safety Board?			✓ Yes	□No
(3) Are mi	nutes included in IIPP file?			√ Yes	□No
(4) Minute	s maintained current year, plus three?			✓ Yes	□No
(5) Minute	s forwarded through channels?			✓ Yes	□No
d. Is the COS	C effective?			✓ Yes	□No
(1) Are CC	OSC recommendations clear, concise and pertinent to	the command?			□No
(2) COSC	proactive to eliminate potential causes of accidents a	ind injuries?		✓ Yes	□No
(3) COSC	disseminate current information and training regardin	g health and safe	ty issues?	✓ Yes	□No
e. Do all perso	onnel receive current information regarding health and	d safety?			□No
f. Are outside	agency safety programs utilized as a resource?			√ Yes	□No
g. Does the co	ommand maintain an effective health and safety com	nunications system	m?	✓ Yes	□No

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

-						
	(1)	.Potential hazards reported on CHP 113B, Hazard Report/In	spection?		Yes	□No
	(2)	Are findings of the 113B, Hazard Report/Inspection, report disseminated according to policy?			Yes	□No
	(3)	Do all members of the command participate in distribution of safety and health information?			✓ Yes	□No
	(4)	COSC minutes posted in a timely manner?			✓ Yes	- No
	(5)	Required posters prominently displayed?			✓ Yes	□No
	(6)	COSC maintain the Command Occupational Safety Bulletin Board?			✓ Yes	□No
	(7)	Are responsibilities for the Occupational Safety Bulletin Board contents assigned to specific members?			√ Yes	□No
5.	DOCU	DOCUMENTATION EVALUATED YES ACTION REQUIRED NO			CORRECTED	)
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Business, completed annually and filed in the employee's field folder?				✓ Yes	□No
		V INF 254, Government Agency Request for Driver License/lequest driver's license record check and filed in the employe		rmation, utilized	✓ Yes	□No
	c. OSI	HA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	☐ No
	(1)	Are required injuries and illnesses logged?			✓ Yes	□No
	(2)	Entries made within six working days of notification of an em	ployee injury or illness?		✓ Yes	□No
	(3)	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No
	(4)	Retention according to policy?			✓ Yes	□No
	(5)	Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6)	Previous calendar year log posted during February?			✓ Yes	□No
(	d. Are	CHP 113s, Accident and Injury Report, compiled accurately?	?		✓ Yes	□No
	(1)	Commander review and sign?			✓ Yes	□No
	(2)	CHP 113s and attachments processed in a timely manner?			✓ Yes	□No
(	e. Doe	s the command utilize the CHP 113A, Safety Inspection Che	cklist?		✓ Yes	□No
	(1)	Are semiannual safety inspections conducted?			☐ Yes	<b></b> ✓ No
	(2)	Are safety hazards identified?			✓ Yes	□No
	(3)	Is corrective action taken within 30 days?			✓ Yes	□ No
	(4)	CHP 113A, Safety Inspection Checklist, maintained with IIPf	and retained according	to policy?	✓ Yes	□No
f.	Are u	nsafe conditions identified and documented on CHP 113B, I	Hazard Report/Inspection	1?	✓ Yes	□No
	(1)	Measures taken to correct situation within 30 days?			✓ Yes	□No
	(2)	Copy of CHP 113B, Hazard Report/Inspection, filed or attach	ned to IIPP?		✓ Yes	□ No
g	. Are t	he CHP 121 series thoroughly and accurately completed?			✓ Yes	□No
	(1)	Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
	(2)	Commander signature on appropriate forms?			✓ Yes	□No

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

5111 45514 (1Cex. 5-50) Of 1005				
(3) Routed within time frames?			✓ Yes	□No
h. Is CHP 208, Accident Prevention Report, thoroughly and accurately completed?				□No
(1) Supervisor comments in-depth, clear, and concise?				□No
(2) Commander review?			✓ Yes	[] No
(3) Commander signs appropriate form?				□No
(4) Properly routed within time limits?				□No
i. Are injuries and accidents documented on CHP 442, Individual Accident, Injury and Safety Recognition Record?			✓ Yes	□No
(1) Are CHP 442s, Individual Accident, Injury and Safety	Recognition Record, curr	ent?	✓ Yes	□No
(2) Safety recognition emblem summary current?			☐ Yes	☑ No
j. Are CHP 712As, Injury and Illness Prevention Program Orio	entation and Review, kep	t current?	✓ Yes	□No
(1) Is specific safety training documented on CHP 712, E	mployee Emergency Acti	on Plan Review?	✓ Yes	□No
(2) Copies maintained with IIPP file?			✓ Yes	□No
6. INJURY AND ILLNESS PREVENTION PROGRAM  EVALUATED ACTION REQUIRED NO				
a. Command specific IIPP on file?				□No
(1) Is the program effective?				□No
(2) Contains all required documents?			✓ Yes	□No
(3) Discussed with all employees?			✓ Yes	□No
(4) All employees understand their roles and responsibiliti	ies?		✓ Yes	□No
(5) Each employee completed CHP 712A, Injury and Illne	ss Prevention Program C	rientation and Review?	✓ Yes	□No
(6) New employees review and complete CHP 712A, Injurand Review?	ry and Illness Prevention	Program Orientation	√ Yes	□No
(7) Are unsafe hazards or conditions identified, investigate	ed, corrected, and docum	ented?	√ Yes	□No
(8) Is required documentation maintained according to po	licy?		✓ Yes	□ No
7. COMMUNICATION WITH DOSH	YES	ACTION REQUIRED NO	CORRECTED	
a. Employees aware of procedures regarding DOSH inspection	ons?		✓ Yes	□No
b. Command's documents readily available for review by DOSH Compliance Officer?				□No
8. HAZARDOUS SUBSTANCE PROGRAM	CORRECTED	)		
a. Does command have a written Hazardous Substance Prog	✓ Yes	□No		
(1) Are hazardous substances identified and properly labeled?				□No
(2) Warning signs posted?				□No
(3) Material Safety Data Sheets readily available?			✓ Yes	□No
(4) Employees receive training?			√ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

### AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

TIP 453M (Rev. 5-06) OPI 009

(5)	Training documented?			✓ Yes	□No
(6)	Employees informed of their right to applicable medical	al and exposure informat	tion?	✓ Yes	□No
HAZAI	RDOUS EXPOSURE CONTROL PROGRAMS	EVALUATED	ACTION REQUIRED	CORRECTE	)
IIAZAI	NDOUS EXPOSURE CONTROL PROGRAMS	YES	NO		
a. Act	tivities identified within command that may require expo	sure to hazardous condi	tions?	☑ Yes	□No
(1)	Appropriate engineering and/or administrative controls	s implemented?		✓ Yes	□No
(2) Protective equipment provided in accordance with bargaining unit agreements?			✓ Yes	□ No	
(3) Employees trained on use and maintenance of equipment?			✓ Yes	□No	
(4) Training documented?			✓ Yes	□No	

5(e)(1): Semi-annual safety inspections was only conducted once in 2008. Area Occupational Safety Coordinator to ensure it is conducted on a semi-annual basis in the future.

5(i)(2): Area Occupational Safety Coordinator to coordinate with Area Office Manager to update employee safety awards record and ensure all employees have received the appropriate safety recognition emblem.

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER "/
Auburn	Valley	J)
EVALUATED BY		DATE
J. Van Dyck		03/11/2009

RUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION	Tourney Dame					
☐ Formal Evaluation ☐ ☐ Informal Evaluation	SUSPENSE DATE					
FOLLOW-UP REQUIRED Correction Report	COMMANDER'S REVIEW		DATE			
☐ Yes ☑ No BY	Mah	$\mathcal{A}$	3/11	109		
1. GOALS AND ACCOMPLISHMENTS	Yes	ACTION REQUIRED No	CORRECTED			
a. Is the command familiar with the Occupational Safety Program     Safety Manual, Chapter 13?	as outlined in HPM 10.6	Occupational	☑ Yes	☐ No		
(1) Are goals developed in accordance with departmental police	y?		√ Yes	☐ No		
(2) Are environmental factors, exposure factors, and past expe	(2) Are environmental factors, exposure factors, and past experience/trends considered when setting goals?					
(3) Are illness and non-serious/non-traumatic injuries excluded	from occupational safet	y goals?	☑ Yes	☐ No		
(4) Are goals appropriately categorized?	(4) Are goals appropriately categorized?					
(5) Are goals realistic?	☑ Yes	☐ No				
(6) Are goals consistent with departmental objectives?	☑ Yes	☐ No				
(7) Is input from all levels considered before goals are establish	(7) Is input from all levels considered before goals are established?					
b. Are goals being accomplished?				☐ No		
(1) Accurate reporting on CHP 113, Accident and Injury Report	?		☑ Yes	☐ No		
(2) Are accidents increasing?			Yes	☑ No		
(3) Are injuries increasing?			Yes	☑ No		
(4) Why are they increasing/decreasing? Accidents and	injuries are remaining c	onsistent.				
(5) Is CHP 113, Accident and Injury Report, posted or readily ac	ccessible?		√ Yes	☐ No		
(6) Are employees knowledgeable about goals and achievemen	nts?		√ Yes	☐ No		
(7) Are employees providing suggestions toward goal attainmen	nt?		√ Yes	☐ No		
2. PARTICIPATION	Yes	ACTION REQUIRED No	CORRECTED			
a. Commander actively involved in program?			√ Yes	☐ No		
(1) Commander active in injury/illness case management?			√ Yes	☐ No		
(2) What is the commander's attitude regarding occupational sa	fety? Captain Wa	rd's main concerns are o	driving, facili	tity use and		
surroundings.						

DEPAR' MENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	433W (Nev. 3-06) OFI 009				
	(3) Occupational safety issues discussed at staff meetings ar	nd training days?		☑ Yes	☐ No
	(4) Are safety issues in the meeting minutes?			√ Yes	☐ No
	(5) Commander comments regarding safety issues in perform	nance evaluations?		☑ Yes	☐ No
	(6) Does the commander ensure use of appropriate safety eq	uipment?		√ Yes	☐ No
b.	Are managers/supervisors actively involved in the program?			☑ Yes	☐ No
	(1) Are managers/supervisors involved in case management?	•		√ Yes	☐ No
	(2) Do they have the appropriate attitude?			☑ Yes	☐ No
	(3) Are managers monitoring supervisors' progress and effort	s to attain goals?		☑ Yes	☐ No
	(4) Are supervisors monitoring employees' efforts?			√ Yes	☐ No
	(5) Do managers comment on safety issues in performance e	valuations?		☑ Yes	☐ No
	(6) Do supervisors comment on safety issues in performance	☑ Yes	☐ No		
	(7) Do managers/supervisors ensure the use of proper safety	☑ Yes	☐ No		
C.	Are employees actively involved in the Occupational Safety Pro	☑ Yes	☐ No		
	(1) Are employees involved in their case management?				☐ No
	(2) Are employees knowledgeable about safety goals?				☐ No
	(3) Are they aware of the command's achievements?			✓ Yes	☐ No
	(4) Are employees practicing safety while performing their dut	ies?		✓ Yes	☐ No
	(5) Are employees reporting unsafe conditions and/or work pro	actices?		√ Yes	☐ No
	(6) Do employees work cooperatively to minimize hazards?			√ Yes	☐ No
	(7) Do employees offer suggestions to improve occupational s	afety?		√ Yes	☐ No
	(8) Is employee equipment properly used and maintained?			√ Yes	☐ No
3. AC	CIDENT AND INJURY TRENDS	EVALUATED Yes	ACTION REQUIRED	CORRECTED	
a.	Commander's method of identifying trends? Captain V	Ward reviews Occuoation		d Injury Repor	ts and
	actively discusses with managers and supervisors at the Area S	atff Meetings			
	(1) Are accidents and injuries being monitored to identify trend	ls?		√ Yes	☐ No
	(2) Is the Occupational Safety Committee reviewing CHP 113, Log of Occupational Injuries and Illnesses, entries, prior me		ort, OSHA 300,	√ Yes	☐ No
	(3) Are personnel in the command aware of current and potent	tial trends?		√ Yes	☐ No
	What corrective action has the command taken when a trend ha	as been identified?	Captain Ward discus	ses with mana	gers and
	supervisors trends and makes suggestions regarding possible w	ays in eliminating proble	m areas.		

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1) Are commanders, managers, and supervisors actively imp	ve actions?	√ Yes	☐ No	
4. C	COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	Yes	ACTION REQUIRED	CORRECTED	
а	a. What is the composition of the COSC? Captain Ward, Se	ergeant Van Dyck,	Officers M. Williams, Mer	ndoncia, Office	Assistant T
	Whalen and Automotive Technician J. Van Maren.				
	(1) Is there representation from each collective bargaining un	it?		☑ Yes	☐ No
	(2) Management and supervisory representation?		- William	☑ Yes	☐ No
	(3) Command Safety Coordinator assigned?			√ Yes	☐ No
	(4) Command Safety Coordinator active and effective?			√ Yes	☐ No
	(5) Are committee assignments rotated?			√ Yes	☐ No
	(6) COSC meetings held quarterly?			☑ Yes	☐ No
	(7) Are meetings held more frequently when goals are not bei	ng attained?		√ Yes	☐ No
	(8) Do all committee members attend the meetings?	8		√ Yes	☐ No
b.	Are roles and responsibilities defined in accordance with IIPP?			√ Yes	☐ No
	(1) Do committee members understand their roles and respon	sibilities?		√ Yes	☐ No
	(2) Is an agenda prepared prior to the meeting?			√ Yes	☐ No
	(3) Are departmental and Division Occupational Safety meeting	gs minutes readily	available?	√ Yes	☐ No
	(4) Are these minutes utilized for Area meetings?			√ Yes	☐ No
	(5) Are assignments given during Area meetings?			☑ Yes	☐ No
c.	Minutes prepared for the COSC meeting?			√ Yes	☐ No
	(1) Recording secretary appointed?			√ Yes	☐ No
	(2) Minutes posted on command's Occupational Safety Board'	?		☑ Yes	☐ No
	(3) Are minutes included in IIPP file?			√ Yes	☐ No
	(4) Minutes maintained current year, plus three?			☑ Yes	☐ No
	(5) Minutes forwarded through channels?			☑ Yes	☐ No
d.	Is the COSC effective?			√ Yes	☐ No
	(1) Are COSC recommendations clear, concise and pertinent t	o the command?		☑ Yes	☐ No
	(2) COSC proactive to eliminate potential causes of accidents	and injuries?		√ Yes	□ No
	(3) COSC disseminate current information and training regardi	ng health and safe	ty issues?	☑ Yes	☐ No
۹.	Do all personnel receive current information regarding health ar	nd safety?		☑ Yes	☐ No
f. /	Are outside agency safety programs utilized as a resource?			☑ Yes	☐ No
g.	Does the command maintain an effective health and safety com-	munications system	m?	√ Yes	☐ No

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

=	100m (100 to 00) 01 1 000				
(E)	(1) Potential hazards reported on CHP 113B, Hazard Report/Inspect		√ Yes	☐ No	
	(2) Are findings of the 113B, Hazard Report/Inspection, report dissen	ninated according	to policy?	√ Yes	☐ No
	(3) Do all members of the command participate in distribution of safe	mation?	√ Yes	☐ No	
	(4) COSC minutes posted in a timely manner?			✓ Yes	☐ No
	(5) Required posters prominently displayed?	✓ Yes	□ No		
	(6) COSC maintain the Command Occupational Safety Bulletin Board	1?		☑ Yes	☐ No
	(7) Are responsibilities for the Occupational Safety Bulletin Board cor	specific members?	✓ Yes	☐ No	
5.	DOCUMENTATION EVALU	ATED	ACTION REQUIRED No	CORRECTED	
	a. STD 261s, Authorization to Use Privately Owned Vehicles on State Bufiled in the employee's field folder?	☑ Yes	☐ No		
	<ul> <li>DMV INF 254, Government Agency Request for Driver License/Identifit to request driver's license record check and filed in the employee's field</li> </ul>	ication Record Info d folder?	ormation, utilized	☑ Yes	□No
	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	☐ No
	(1) Are required injuries and illnesses logged?			☑ Yes	☐ No
	(2) Entries made within six working days of notification of an employe	√ Yes	☐ No		
_	(3) Is lost-time and limited-duty documentation accurate?		√ Yes	☐ No	
	(4) Retention according to policy?			☑ Yes	☐ No
	(5) Readily accessible for review by Cal-OSHA?			√ Yes	☐ No
	(6) Previous calendar year log posted during February?			☑ Yes	☐ No
-	d. Are CHP 113s, Accident and Injury Report, compiled accurately?			☑ Yes	☐ No
	(1) Commander review and sign?			√ Yes	☐ No
	(2) CHP 113s and attachments processed in a timely manner?			☑ Yes	☐ No
E	e. Does the command utilize the CHP 113A, Safety Inspection Checklist?			√ Yes	☐ No
	(1) Are semiannual safety inspections conducted?			☑ Yes	☐ No
	(2) Are safety hazards identified?			√ Yes	☐ No
	(3) Is corrective action taken within 30 days?			✓ Yes	☐ No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP and I	retained according	to policy?	√ Yes	☐ No
f.	f. Are unsafe conditions identified and documented on CHP 113B, Hazard	l Report/Inspectio	n?	✓ Yes	☐ No
	(1) Measures taken to correct situation within 30 days?			☑ Yes	☐ No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached to	IIPP?		☑ Yes	☐ No
7 T	n. Are the CHP 121 series thoroughly and accurately completed?			√ Yes	☐ No
	(1) Supervisory comments in-depth, clear, and concise?			√ Yes	☐ No
	(2) Commander signature on appropriate forms?			√ Yes	☐ No

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

_		(7)	Employoca receive training:		ıvı res	∐ No	
			waterial Salety Data Sneets readily available? ————————————————————————————————————			✓ Yes	□ No
	-		Warning signs posted?  Material Safety Data Sheets readily available?			✓ Yes ✓ Yes	□ No
							∐ No
	a. Does command have a written Hazardous Substance Program for substances used within that command?					✓ Yes	∐ No
8.			DOUS SUBSTANCE PROGRAM	Yes Yes	NO NO	CORRECTED	
	b.	Com	mand's documents readily available for review by DOSH Co	Market Services	5	☑ Yes	☐ No
	а.	Emp	loyees aware of procedures regarding DOSH inspections?			☑ Yes	□ No
7.	со	MMU	INICATION WITH DOSH	Yes	ACTION REQUIRED No	CORRECTED	
		(8)	Is required documentation maintained according to policy?			☑ Yes	□ No
		(7)	Are unsafe hazards or conditions identified, investigated, co	rrected, and documente	d?	☑ Yes	☐ No
			New employees review and complete CHP 712A, Injury and and Review?	Illness Prevention Prog	ram Orientation	☑ Yes	☐ No
		(5)	Each employee completed CHP 712A, Injury and Illness Pre	evention Program Orient	ation and Review?	√ Yes	☐ No
		(4)	All employees understand their roles and responsibilities?			☑ Yes	☐ No
		(3)	Discussed with all employees?		P.	☑ Yes	☐ No
_	(2) Contains all required documents?					☑ Yes	☐ No
	(1) Is the program effective?					√ Yes	☐ No
	a.	a. Command specific IIPP on file?					☐ No
6	. IN	INJURY AND ILLNESS PREVENTION PROGRAM  EVALUATED Yes  ACTION REQUIRED NO					
_	(2) Copies maintained with IIPP file?						☐ No
		(1)	Is specific safety training documented on CHP 712, Employ	ee Emergency Action P	lan Review?	☑ Yes	☐ No
	j. Are CHP 712As, Injury and Illness Prevention Program Orientation and Review, kept current?						☐ No
	(2) Safety recognition emblem summary current?						☐ No
	(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?						☐ No
	i.	Are	injuries and accidents documented on CHP 442, Individual A	Accident, Injury and Safe	ty Recognition Record?	√ Yes	☐ No
-		(4)	Properly routed within time limits?		W W	☑ Yes	☐ No
		(3)	Commander signs appropriate form?			☑ Yes	□No
		(2)	Commander review?			☑ Yes	☐ No
-		(1)	Supervisor comments in-depth, clear, and concise?			√ Yes	☐ No
-	h.	. Is (	CHP 208, Accident Prevention Report, thoroughly and accura	ately completed?		☑ Yes	☐ No
Ξ	-	(3)				☑ Yes	□ No
100	Sec. 11	100111	(1.C4. 5-55) C1 1 655				

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(5) Training documented?			☑ Yes	☐ No	
	(6) Employees informed of their right to applicable medical and exposure information?				☑ Yes	☐ No
9. I	. HAZARDOUS EXPOSURE CONTROL PROGRAMS  EVALUATED Yes  ACTION REQUIRED No				CORRECTED	
a	a. Activities identified within command that may require exposure to hazardous conditions?					☐ No
	(1) Appropriate engineering and/or administrative controls implemented?				☑ Yes	☐ No
	(2) Protective equipment provided in accordance with bargaining unit agreements?			☑ Yes	☐ No	
	(3) Employees trained on use and maintenance of equipment?			☑ Yes	☐ No	
	(4) Training documented?			☑ Yes	☐ No	

# COMMAND INSPECTION PROGRAM "XCEPTIONS DOCUMENT

Command:	Division:	Chapter:
Amador (295)	Valley	12
Inspected by:	Date:	
Sergeant R. Houde	03/25/09	

Page 1 of 2

number of the inspection in the Chap shall be routed to and its due date. T	eter Inspection number. Under "Fo This document shall be utilized to	oxes as necessary, or fill in the blanks as indicatorized to:" enter the next level of command whe document innovative practices, suggestions for be used to appeal findings. A CHP 51 Memoral	re the document statewide
TYPE OF INSPECTION		☐ Corrective Action Plan Included	
☐ Division Level ☐ Command	Level	Appeal Included	
☐ Executive Office Level			neck Lists
Follow-up Required:	Forward to: Valley Division	Commander's Signature:	Date:
☐ Yes	Due Date:	B-16	3/26/09
Chapter Inspection:			
Inspector's Comments Rega	arding Innovative Practice	es:	
None.			
	9		
Command Suggestions for S	Statewide Improvement:		
None.			
Inspector's Findings:			
Introduction			

 From March 25, 2009, to March 26, 2009, the Amador Area conducted a comprehensive evaluation of the Command's Occupational Safety program as required by Chapter 12 of HPG22.1 to ensure compliance with departmental policy. As part of the evaluation, the inspection team reviewed the Area S.O.P., Occupational Safety logs and forms, and AOSC meeting minutes. The inspection was completed by 1500 hours on March 26, 2009.

#### **Prior Audits**

The last prior audit of these processes was completed by Valley Division on April 24, 2000.

### **Summary of Findings**

• No discrepancies were noted during the inspection. All documentation and processes appear to be in compliance with departmental policy and procedures, as well as with legal statutes.

# COMMAND INSPECTION PROGRAM TXCEPTIONS DOCUMENT

Command:	Division:	Chapter:	
Amador (295)	Valley	12	
Inspected by:	Date:		
Sergeant R. Houd	03/25/09		

Page 2 of 2

Commander's Response:	
The Amador Area Commander has been apprised of the finding	gs of this inspection.
Inspector's Comments:	
The inspector believes the Amador Area OSC, and command for	ollow the goals of the Department in
minimizing the risk of injuries to employee's by ensuring the Am	
Required Action	
Corrective Action Plan/Timeline	
None.	
Appeal Process: (Appeals shall be filed within five (5) business days of the	ne completed chanter inspection)
	is completed unapiet inspectionly.
mmander's Basis for Appeal:	
N/A	
Appeal Review/Decision: (This shall be the only level of appeal).	
N/A	
IV/A	
Lead Inspector's Signatule:	Date:
to the laboration	03/26/2009
Responding Commander's Signature (for appeal):	Date:
N/A	

STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION

### **OCCUPATIONAL SAFETY**

CHP 453M (Rev. 5-06) OPI 009

AREA	DIVISION	NUMBER
Amador	Valley	295
EVALUATED BY		DATE
Sgt. Houdeshell, 12366,Officer Fralick, 15107		03/26/2009

c453m506.pdf

INSTRUCTIONS: Indicate items reviewed by placing a check in the "Evaluated" box and/or the "Action Required" box. If this form is used as a Correction Report, the "Correction" box should be initialed and dated as deficiencies are corrected. Answer individual items with "yes" or "no" answers, or fill in the blanks as indicated. If additional comments are necessary, the information can be placed on the CHP 454, Area Management Evaluation Supplement. The Supplement should include significant findings, accomplishments or corrective actions, unresolved items, problems or progress, and the evaluator's overall impressions. This form can be completed in pen or pencil, and the Supplement can be handwritten if desired.

TYPE OF EVALUATION		SUSPENSE-DATE - 03/27/2009				
	UP REQUIRED		COMMANDER'S REVIEW		DATE	
□Ye	es 🕜 No	☐ Correction Report	_ 5-1		3/20	109
1. GOA	ALS AND ACCOMPLISE	HMENTS	3/25/09 and 3/26/09	ACTION REQUIRED  None	CORRECTED N/A	)
	Is the command familiar of Safety Manual, Chapter	with the Occupational Safety Progr 13?	am as outlined in HPM 10.6	o, Occupational	✓ Yes	□No
(	(1) Are goals developed	in accordance with departmental p	policy?		✓ Yes	□No
(2	(2) Are environmental fa	actors, exposure factors, and past e	experience/trends considere	d when setting goals?	✓ Yes	□No
(3	(3) Are illness and non-serious/non-traumatic injuries excluded from occupational safety goals?					
(4	(4) Are goals appropriately categorized?					
(5	5) Are goals realistic?				✓ Yes	□No
(6	6) Are goals consistent	with departmental objectives?			✓ Yes	□No
(7	7) Is input from all levels	s considered before goals are esta	blished?		✓ Yes	□No
b. A	Are goals being accompli	shed?			✓ Yes	□No
(1	Accurate reporting or	n CHP 113, Accident and Injury Re	port?		✓ Yes	□No
(2	2) Are accidents increas	sing?			☐ Yes	☑ No
(3	3) Are injuries increasing	g?			✓ Yes	□No
(4	4) Why are they increas	sing/decreasing? Injuries have inc	reased due to the high frequ	ency of uncooperative	suspects con	tacted and
	arrested (ieresisting	g arrest.)				
(5	5) Is CHP 113, Accident	t and Injury Report, posted or readi	ily accessible?		✓ Yes	□No
(6	6) Are employees knowl	ledgeable about goals and achieve	ements?		✓ Yes	□No
(7	7) Are employees provid	ding suggestions toward goal attain	nment?		✓ Yes	□No
2. PART	TICIPATION		3/25/09	None None	N/A	
a. Co	commander actively invol	ved in program?			✓ Yes	□No
(1)	) Commander active in	injury/illness case management?			✓ Yes	□No
(2)	2) What is the command	ler's attitude regarding occupationa	al safety? Occupational Sa	fety is a top priority. A	rea comman	der believes
	a decrease in occupat	tional safety incidents heightens or	perational readiness.			

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	om (1.61. 5.65) of 1.665				
(	Occupational safety issues discussed at staff meetings and	I training days?		✓ Yes	□No
(,	Are safety issues in the meeting minutes?			✓ Yes	□No
(:	5) Commander comments regarding safety issues in performa	ance evaluations?		✓ Yes	□No
((	6) Does the commander ensure use of appropriate safety equ	ipment?		✓ Yes	□No
b. <i>F</i>	Are managers/supervisors actively involved in the program?			✓ Yes	□No
('	Are managers/supervisors involved in case management?		***	✓ Yes	□No
(2	Do they have the appropriate attitude?			✓ Yes	□No
(3	3) Are managers monitoring supervisors' progress and efforts	to attain goals?		√ Yes	□No
(4	4) Are supervisors monitoring employees' efforts?			✓ Yes	□No
(5	5) Do managers comment on safety issues in performance eva	aluations?		✓ Yes	□No
(€	Do supervisors comment on safety issues in performance e	valuations?		√ Yes	□No
(7	Do managers/supervisors ensure the use of proper safety e	equipment?		✓ Yes	□No
c. A	re employees actively involved in the Occupational Safety Prog	gram?		✓ Yes	□No
(1	) Are employees involved in their case management?			✓ Yes	□No
(2	Are employees knowledgeable about safety goals?			✓ Yes	□No
(3	) Are they aware of the command's achievements?			✓ Yes	□No
(4	) Are employees practicing safety while performing their dutie	es?		✓ Yes	□No
(5	) Are employees reporting unsafe conditions and/or work prac	ctices?		✓ Yes	□No
(6	) Do employees work cooperatively to minimize hazards?			✓ Yes	□No
(7)	) Do employees offer suggestions to improve occupational sa	fety?		✓ Yes	□No
(8)	) Is employee equipment properly used and maintained?			✓ Yes	□No
ACCI	DENT AND INJURY TRENDS	03/25/09	ACTION REQUIRED None	CORRECTED N/A	P.
a. Co	ommander's method of identifying trends? Commander or desi	ignce attends the Divis	sion Occupational Safety		and attends
qι	narterly Area Occupational Safety meetings with uniformed an	nd non-uniformed emp	loyee's.		
		V			
(1)	Are accidents and injuries being monitored to identify trends:	?		✓ Yes	□No
(2)	Is the Occupational Safety Committee reviewing CHP 113, A Log of Occupational Injuries and Illnesses, entries, prior mee		oort, OSHA 300,	✓ Yes	□No
(3)	Are personnel in the command aware of current and potential	al trends?		✓ Yes	□No
b. Wh	nat corrective action has the command taken when a trend has	s been identified? Add	ditional training, feedback	from empl	oyee's, and
im	plementation of reasonable recommendations made by Area oc	cupational safety comm	nittee		

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

## AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

4 COMMAND OCCUPATIONAL SAFETY COMMITTEE (COSC)	ORRECTED	
None N	17.78	
a. What is the composition of the COSC? Area management staff, uniformed and non uniformed employee's make up t	the COS	□ in the
Amador Area.		
(1) Is there representation from each collective bargaining unit?	✓ Yes	□No
(2) Management and supervisory representation?	✓ Yes	□No
(3) Command Safety Coordinator assigned?	✓ Yes	□No
(4) Command Safety Coordinator active and effective?	✓ Yes	□No
(5) Are committee assignments rotated?	✓ Yes	□No
(6) COSC meetings held quarterly?	☑ Yes	□No
(7) Are meetings held more frequently when goals are not being attained?	☑ Yes	□No
(8) Do all committee members attend the meetings?	✓ Yes	□No
b. Are roles and responsibilities defined in accordance with IIPP?	✓ Yes	□No
(1) Do committee members understand their roles and responsibilities?	✓ Yes	□No
(2) Is an agenda prepared prior to the meeting?	✓ Yes	□No
(3) Are departmental and Division Occupational Safety meetings minutes readily available?	✓ Yes	□No
(4) Are these minutes utilized for Area meetings?	☑ Yes	□No
(5) Are assignments given during Area meetings?	✓ Yes	□No
c. Minutes prepared for the COSC meeting?	✓ Yes	□No
(1) Recording secretary appointed?	☑ Yes	□No
(2) Minutes posted on command's Occupational Safety Board?	☑ Yes	□No
(3) Are minutes included in IIPP file?	✓ Yes	□No
(4) Minutes maintained current year, plus three?	☑ Yes	□No
(5) Minutes forwarded through channels?	✓ Yes	□No
d. Is the COSC effective?	/ Yes	□No
(1) Are COSC recommendations clear, concise and pertinent to the command?	Z Yes	□No
(2) COSC proactive to eliminate potential causes of accidents and injuries?	Z Yes	□No
(3) COSC disseminate current information and training regarding health and safety issues?	7 Yes	□No
e. Do all personnel receive current information regarding health and safety?	/ Yes	□No
f. Are outside agency safety programs utilized as a resource?	☑ Yes	□No
g. Does the command maintain an effective health and safety communications system?	☑ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

	(1) Potential hazards reported on CHP 113B, Hazard Report/Ins	spection?		✓ Yes	□No
	(2) Are findings of the 113B, Hazard Report/Inspection, report d	disseminated according t	o policy?	✓ Yes	□No
-	(3) Do all members of the command participate in distribution of	f safety and health inform	nation?	✓ Yes	□No
_	(4) COSC minutes posted in a timely manner?			✓ Yes	□No
	(5) Required posters prominently displayed?			✓ Yes	□No
	(6) COSC maintain the Command Occupational Safety Bulletin	Board?			□No
	(7) Are responsibilities for the Occupational Safety Bulletin Boar	✓ Yes	□No		
5. DOCUMENTATION		03/26/09	ACTION REQUIRED None	CORRECTED N/A	
	a. STD 261s, Authorization to Use Privately Owned Vehicles on Staffled in the employee's field folder?	ate Business, completed	annually and	✓ Yes	□No
	<ul> <li>DMV INF 254, Government Agency Request for Driver License/lo to request driver's license record check and filed in the employee</li> </ul>		rmation, utilized	✓ Yes	□No
-	c. OSHA 300, Log of Occupational Injury and Illnesses, utilized?			✓ Yes	□No
	(1) Are required injuries and illnesses logged?			✓ Yes	□No
	(2) Entries made within six working days of notification of an em	ployee injury or illness?		✓ Yes	□No
	(3) Is lost-time and limited-duty documentation accurate?			✓ Yes	□No
	(4) Retention according to policy?			☑ Yes	□No
	(5) Readily accessible for review by Cal-OSHA?			✓ Yes	□No
	(6) Previous calendar year log posted during February?			✓ Yes	□No
	d. Are CHP 113s, Accident and Injury Report, compiled accurately?			✓ Yes	□No
	(1) Commander review and sign?			✓ Yes	□No
	(2) CHP 113s and attachments processed in a timely manner?			✓ Yes	□No
(	e. Does the command utilize the CHP 113A, Safety Inspection Chec	cklist?		✓ Yes	□No
	(1) Are semiannual safety inspections conducted?			✓ Yes	□No
	(2) Are safety hazards identified?			✓ Yes	□No
	(3) Is corrective action taken within 30 days?			✓ Yes	□No
	(4) CHP 113A, Safety Inspection Checklist, maintained with IIPP	and retained according	to policy?	✓ Yes	□No
f	f. Are unsafe conditions identified and documented on CHP 113B, H	lazard Report/Inspection	1?	Yes	□No
	(1) Measures taken to correct situation within 30 days?			✓ Yes	□No
	(2) Copy of CHP 113B, Hazard Report/Inspection, filed or attached	ed to IIPP?		✓ Yes	□No
g	g. Are the CHP 121 series thoroughly and accurately completed?			✓ Yes	□No
_	(1) Supervisory comments in-depth, clear, and concise?			✓ Yes	□No
	(2) Commander signature on appropriate forms?			✓ Yes	□No

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

# AREA MANAGEMENT EVALUATION OCCUPATIONAL SAFETY

			(1011000)				
-		(3)	Routed within time frames?			✓ Yes	□No
	h.	ls (	CHP 208, Accident Prevention Report, thoroughly and accur	ately completed?		✓ Yes	□No
		(1)	Supervisor comments in-depth, clear, and concise?			✓ Yes	□No
		(2)	Commander review?			✓ Yes	□No
		(3)	Commander signs appropriate form?			✓ Yes	□No
		(4)	Properly routed within time limits?			✓ Yes	□No
	i.	Are	injuries and accidents documented on CHP 442, Individual	Accident, Injury an	d Safety Recognition Record?	✓ Yes	□No
	(1) Are CHP 442s, Individual Accident, Injury and Safety Recognition Record, current?				✓ Yes	□No	
Co-		(2)	Safety recognition emblem summary current?			✓ Yes	□No
	j.	Are	CHP 712As, Injury and Illness Prevention Program Orientati	ion and Review, ke	ept current?	✓ Yes	□No
		(1)	Is specific safety training documented on CHP 712, Employ	yee Emergency Ac	ction Plan Review?		☐ No
		(2)	Copies maintained with IIPP file?			Yes	□No
6.	IN.	JUR	Y AND ILLNESS PREVENTION PROGRAM	03/26/09	ACTION REQUIRED None	CORRECTED N/A	
	a.	Cor	mmand specific IIPP on file?			✓ Yes	□No
		(1)	Is the program effective?			✓ Yes	□No
		(2)	Contains all required documents?			✓ Yes	□No
		(3)	Discussed with all employees?			✓ Yes	□No
		(4)	All employees understand their roles and responsibilities?			✓ Yes	□No
		(5)	Each employee completed CHP 712A, Injury and Illness Pr	evention Program	Orientation and Review?	✓ Yes	□No
	(6) New employees review and complete CHP 712A, Injury and Illness Prevention Program Orientation and Review?					✓ Yes	□No
		(7) Are unsafe hazards or conditions identified, investigated, corrected, and documented?				✓ Yes	□No
		(8)	Is required documentation maintained according to policy?			✓ Yes	□No
7.	СО	мми	UNICATION WITH DOSH	03/26/09	None None	CORRECTED N/A	)
	a.	Emp	ployees aware of procedures regarding DOSH inspections?			✓ Yes	□No
	b.	Com	nmand's documents readily available for review by DOSH Co			✓ Yes	□No
8.	HA	ZAR	DOUS SUBSTANCE PROGRAM	03/26/09	None None	CORRECTED N/A	
	а.	. Does command have a written Hazardous Substance Program for substances used within that command?				✓ Yes	□No
		(1) Are hazardous substances identified and properly labeled?				✓ Yes	□No
	(	(2)	Warning signs posted?			✓ Yes	□No
	(	(3) I	Material Safety Data Sheets readily available?			✓ Yes	□No
	(	(4) l	Employees receive training?			✓ Yes	□No

### DEPARTMENT OF CALIFORNIA HIGHWAY PATROL AREA MANAGEMENT EVALUATION **QCCUPATIONAL SAFETY**

(5) Training documented?			✓ Yes	□No
(6) Employees informed of their right to applicable medi	) Employees informed of their right to applicable medical and exposure information?			□No
). HAZARDOUS EXPOSURE CONTROL PROGRAMS	03/26/09	ACTION REQUIRED None	CORRECTED N/A	
a. Activities identified within command that may require exp	osure to hazardous condi	tions?	✓ Yes	□No
<ul><li>(1) Appropriate engineering and/or administrative controls implemented?</li><li>(2) Protective equipment provided in accordance with bargaining unit agreements?</li></ul>			✓ Yes	□No
			✓ Yes	□No
(3) Employees trained on use and maintenance of equip	oment?		✓ Yes	□No
(4) Training documented?			✓ Yes	□No